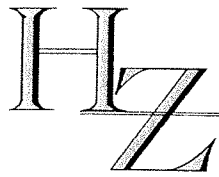


EXHIBIT 28



HAGNER & ZOHLMAN, LLC

ATTORNEYS AT LAW

COPY

JOHN A. ZOHLMAN III ◇ *
THOMAS J. HAGNER ◇

LOUIS A. SIMONI *

◇ CERTIFIED BY THE SUPREME COURT
OF NEW JERSEY AS A CIVIL TRIAL
ATTORNEY

* ALSO MEMBER OF PA. BAR

COMMERCE CENTER
1820 CHAPEL AVENUE WEST
SUITE 160
CHERRY HILL, NJ 08002
PHONE 856.663.9090
FAX 856.663.9199

JZOHLMAN@HZLAWPARTNERS.COM
THAGNER@HZLAWPARTNERS.COM
LSIMONI@HZLAWPARTNERS.COM

April 24, 2007

Wachovia Corporation
Attn: Scott Hamilton
Compensation and Benefits
NC0960
301 South Tryon Street
Charlotte, NC 28288-0960

Re: Robert Conrad
Claim No. 2021495

Dear Mr. Hamilton:

Thank you for your letter of April 18, 2007. Since it is our position that Mr. Conrad's disability began in the year 2003, I would appreciate it if you could provide me with copies of the 2003 Short Term and Long Term SPD's. Additionally, I am requesting your assistance in providing copies of any and all employment records pertaining to Mr. Conrad's attendance during the months of September, October, November and December 2003. I am requesting copies of any and all attendance and/or performance records maintained by Mr. Conrad's supervisor. And, in addition, I am requesting copies of all telephone records and/or logs reflecting the volume of calls in which Mr. Conrad participated during the period of September through December 2003.'

If there is any problem with providing this information, please advise.

Very truly yours,

THOMAS J. HAGNER

TJH/mck

EXHIBIT 29



HAGNER & ZOHLMAN, LLC

ATTORNEYS AT LAW

JOHN A. ZOHLMAN III ◇ *
THOMAS J. HAGNER ◇

COMMERCE CENTER
1820 CHAPEL AVENUE WEST
SUITE 160
CHERRY HILL, NJ 08002
PHONE 856.663.9090
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LOUIS A. SIMONI *

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ATTORNEY

* ALSO MEMBER OF PA. BAR

JZOHLMAN@HZLAWPARTNERS.COM
THAGNER@HZLAWPARTNERS.COM
LSIMONI@HZLAWPARTNERS.COM

April 25, 2007

Ms. Kate Schultz
Sr. Disability Case Manager
Liberty Life Assurance Company
P.O. Box 242484
Charlotte, NC 28224-9904

Re: Robert Conrad
Claim No. 2021495

Dear Ms. Schultz:

Thank you for your letter of March 23, 2007 indicating that Mr. Conrad's file has been re-opened and you have resumed your investigation. Please note, however, that as of this date Mr. Conrad has not received a check for monthly benefits for this month.

I have reviewed the claims file and it is not clear whether or not your office received Dr. Petruncio's report establishing the commencement of Mr. Conrad's disability. For your reference, I enclose an original copy of that report.

Also, for your reference I am enclosing the following:

- a. Notes of treatment by George J. Petruncio, M.D. between September 2003 and December 2003;
- b. Medical report of Michael J. Barnish, D.O. dated November 3, 2003;
- c. Medical report of Nicholas L. DePace, M.D. dated February 25, 2005;
- d. Medical report of Pravin B. Vasoya, M.D. dated March 2, 2005.

Ms. Kate Schultz
April 25, 2007
Page 2

I note that your claim file indicates that you have sent letters to Mr. Conrad's treating Physicians including Dr. Morley, Dr. Sanders, Dr. Irigoyen, Dr. Ceruti and Dr. Petruncio. If you experience any delay in receiving responses to those letters, please notify me promptly so that I can follow up.

One item that I also note from a review of your claim file was a letter to Mr. Conrad dated December 17, 2006 stating that the Wachovia Group, LTD Plan does not provide intermittent chronic disability benefits. I am enclosing herewith for your review certain excerpts from the Wachovia Summary Plan Description pertaining to the Short Term Disability Plan and Long Term Disability Plan. I would respectfully refer you to page 97 which includes a provision for "intermittent chronic disability." It states that "If you suffer from an intermittent chronic disability as defined on page 66 of the STD Summary, you may be entitled to receive LTD benefits after you have been absent from work due to your disability for a total of 26 weeks (130 work days) during any rolling twelve month period."

The medical records which we are providing show that Mr. Conrad's disability began in December 2003. As stated by Dr. Petruncio, "In September 2003, Mr. Conrad experienced the onset of symptoms of depression, fatigue and malaise... Since the onset of symptoms in September 2003, he has experienced spontaneous diaphoresis of unknown etiology, depression, myalgias, sleep apnea, etc. His attempts to return to work only aggravated his condition with a result in total disability."

Recently one of Mr. Conrad's treating physicians, Dr. Sanders, advised him to cut his hours down from five half days per week to only three half days per week.

According to the plan, the Short Term Disability Plan permits an accumulation of eight days of absence towards the elimination period, which may include partial work days. We are in the process of confirming with Wachovia Corporation these partial days of absences.

You are aware that Mr. Conrad participated in the return to work program and, therefore, is entitled to full disability benefits if his monthly earnings were less than 20% of his pre-disability earnings. And, he is entitled to a continuation of an LTD benefit in a partial amount if his monthly earnings fall between 20 and 80% of his pre-disability earnings.

The pre-disability earnings are determined as of the business day immediately preceding the date a disability is incurred. In Mr. Conrad's case, it is based upon a rolling twelve month amount.

I am enclosing herewith copies of Mr. Conrad's pay stubs commencing September 15, 2002 through March 15, 2007. The operative time period is September 2002 through August 2003, give the onset of Mr. Conrad's disability in September 2003.

Ms. Kate Schultz
 April 24, 2007
 Page 3

The earnings for that period are as follows:

September 2002	\$15,606.30
October 2002	\$ 6,117.47
November 2002	\$20,130.21
December 2002	\$ 8,539.34
January 2003	\$12,753.36
February 2003	\$24,288.58
March 2003	\$16,292.12
April 2003	\$18,529.22
May 2003	\$15,733.79
June 2003	\$ 6,705.74
July 2003	\$ 5,142.92
August 2003	\$ 9,416.12
 Total	 \$159,255.17
70%	\$111,479.00
BEC	\$ 9,290.00

Based upon the above, Mr. Conrad was entitled to receive six months of Short Term Disability benefits representing 100% of the BEC of \$9,290.00 which equals \$55,740.00. Subsequently, he was entitled to receive Long Term Disability benefits representing sixty-six and two-thirds of the BEC or \$6,193.00.

Most importantly, Mr. Conrad's BEC needs to be calculated at the onset of his disability, not subsequently after his illness had taken its toll and negatively impacted his productivity.

Finally, with respect to the pre-disability earnings which determine whether or not Mr. Conrad continues to be eligible for benefits after he began dissipation in the return to work program, the applicable numbers are based upon the total amount specified above in the sum of \$159,255.17, or \$13, 271.26 per month. Therefore, the applicable numbers are as follows:

20%	\$2,654.25
80%	\$10,617.01

If you have any questions with respect to the above, please do not hesitate to contact me.

Very truly yours,

THOMAS J. HAGNER

TJH/mck
 Enc.

EXHIBIT 30

Wachovia HR Service Center
7201 Hewitt Associates Drive
PO Box 563995
Charlotte, NC 28256-3995



May 8, 2007

WACHOVIA

Thomas J. Hagner, Esq.
Hagner & Zohlman, LLC
Commerce Center
1820 Chapel Avenue West
Suite 160
Cherry Hill, NJ 08002

***Re: Robert Conrad
Claim No. 2021495***

Pursuant to the request issued to Wachovia Corporation, it is not our practice to provide employment/payroll records of employees without a subpoena. Please forward the appropriate documentation and I will respond upon receipt.

If you should have any questions, please feel free to contact me.

Sincerely,

Wachovia Human Resources Service Center
HR BPO Operations
704-646-2073
704-646-3004 - Fax



HAGNER & ZOHLMAN, LLC

ATTORNEYS AT LAW

JOHN A. ZOHLMAN III ◊ *
THOMAS J. HAGNER ◊

LOUIS A. SIMONI *

◊ CERTIFIED BY THE SUPREME COURT
OF NEW JERSEY AS A CIVIL TRIAL
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JZOHLMAN@HZLAWPARTNERS.COM
THAGNER@HZLAWPARTNERS.COM
LSIMONI@HZLAWPARTNERS.COM

April 24, 2007

Wachovia Corporation
Attn: Scott Hamilton
Compensation and Benefits
NC0960
301 South Tryon Street
Charlotte, NC 28288-0960

Re: Robert Conrad
Claim No. 2021495

Dear Mr. Hamilton:

Thank you for your letter of April 18, 2007. Since it is our position that Mr. Conrad's disability began in the year 2003, I would appreciate it if you could provide me with copies of the 2003 Short Term and Long Term SPD's. Additionally, I am requesting your assistance in providing copies of any and all employment records pertaining to Mr. Conrad's attendance during the months of September, October, November and December 2003. I am requesting copies of any and all attendance and/or performance records maintained by Mr. Conrad's supervisor. And, in addition, I am requesting copies of all telephone records and/or logs reflecting the volume of calls in which Mr. Conrad participated during the period of September through December 2003.

If there is any problem with providing this information, please advise.

Very truly yours,

THOMAS J. HAGNER

TJH/mck

NO. 1194 P. 2

MAY. 3. 2007 3:06PM WACHOVIA

EXHIBIT 31



Liberty Life Assurance Company of Boston
Disability Claims
P.O. Box 242484
Charlotte, NC 28224-9904
Phone No.: (800) 853-7108 Ext. 369
Secure Fax No.: (888) 443-4212

May 17, 2007

Hagner & Zohlman, LLC
ATTN: Thomas J. Hagner
Attorneys At Law
1820 Chapel Avenue West
Suite 160
Cherry Hill, NJ 08002-0000

RE: Long Term Disability Benefits
Claimant Name: Robert Conrad
Claim #: 2021495

Dear Thomas J. Hagner:

This is in response to your letter dated April 25, 2007 with regard to Mr. Conrad's claim for Long Term Disability (LTD) benefits under the Wachovia Corporation Group LTD Plan.

As of the date of this letter, Mr. Conrad should have received the LTD benefit payment due him for the month of March. Payment of his April 2007 LTD benefits will be released upon receipt of his earnings for the month of April.

We are in receipt of the medical documentation you included with the above mentioned letter and we appreciate your assistance. We understand Mr. Conrad received treatment for his condition during the time period covered by the medical documentation; however, our investigation on Mr. Conrad's claim has established that the date of disability applicable to his LTD claim is August 3, 2004.

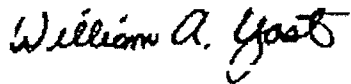
We also acknowledge your reference to pages 66 and 97 of the Wachovia Summary Plan Description pertaining to the Short Term Disability (STD) Plan and the Long Term Disability Plan concerning "intermittent chronic disability". Please note the language that you are referencing defines the requirements for fulfilling the Elimination Period to be eligible for LTD benefits. Specifically, for those employees who are out of work on an intermittent chronic disability. The reason for this explanation is because there are differences in meeting the required Elimination Period when comparing an intermittent chronic disability claim with a non-intermittent chronic disability claim. Please note that we have previously established that Mr. Conrad did meet the Elimination Period defined in the LTD Plan. As such, he began receiving LTD benefits effective February 1, 2005.

With regard to Mr. Conrad's participation in the return to work program, he has received Partial LTD benefits under the "Work Incentive Benefits" provision as described in Article 3.7 of the LTD Plan. He began receiving such benefits under the above provision as of October 10, 2005. Please note points (3) and (4) under Article 3.7 which describe the further reduction of the disability benefits otherwise payable after the Participant has returned to employment of any kind for twelve months. Since Mr. Conrad has been working on a part time basis in excess of twelve months, his Partial LTD benefits have been reduced in accordance with point (3) under Article 3.7 effective November 2006.

With regard to the calculation of Mr. Conrad's Benefits Eligible Compensation (BEC), we must defer all comments and inquiries directly to the Wachovia Corporation, as we are not able to comment on this. The BEC for each employee who files a claim for disability benefits is calculated by the Wachovia Corporation and then provided to Liberty Mutual.

As you are aware, we are currently evaluating Mr. Conrad's eligibility for continued LTD benefits under the Plan change in definition of disability. Mr. Conrad's LTD benefits have continued while we complete our evaluation. We will be contact with you regarding the completion of our evaluation shortly.

Sincerely,

A handwritten signature in black ink that reads "William A. Yost". The signature is written in a cursive style with a large, stylized 'W' and 'Y'.

William A. Yost
On Behalf of Kathryn Schulz
Phone No.: (800) 853-7108 Ext. 369
Secure Fax No.: (888) 443-4212

EXHIBIT 32



Liberty Life Assurance Company of Boston
Disability Claims
P.O. Box 242484
Charlotte, NC 28224-9904
Phone No.: (800) 853-7108 Ext. 369
Secure Fax No.: (888) 443-4212

May 23, 2007

Robert Conrad
C / O Hagner & Zohlman, LLC
ATTN: Thomas J. Hagner
1820 Chapel Ave West Suite 160
Cherry Hill, NJ 08002-0000

RE: Long Term Disability Benefits
Wachovia Corporation
Claim #: 2021495

Dear Mr. Conrad:

This letter is in regard to your claim for Long Term Disability (LTD) benefits under the Wachovia Corporation Group LTD Plan. The above Plan requires that to receive benefits, you must meet the following definition of disability.

"Disability" is defined as:

- (a) during the Elimination period and the next 24 month, the Participant's inability to perform all of the material and substantial duties of his or her own occupation on an Active Employment basis because of an Injury or Sickness; and*
- (b) after the period described in paragraph (a) above, the Participant's inability to perform all of the material and substantial duties of his or her own or any other occupation for which he or she is or becomes reasonably fitted by training, education, or experience because of an Injury or Sickness.*

A review of your file indicates your date last worked was August 2, 2004 and your date of disability was August 03, 2004. According to our records, you were approved for LTD benefits effective February 1, 2005 with the diagnoses of sleep apnea, chronic fatigue, and depression. You initially received LTD benefits on the basis of your inability to perform your own occupation as of your LTD benefit effective date. You subsequently returned to work in a reduced hours capacity, which Wachovia accommodated, and thus you began receiving Partial LTD benefits effective October 10, 2005. To date, your most recent LTD benefits have been paid through March 2007, pending verification of your reduced hours earnings for April 2007.

Throughout the course of your claim we have requested updated medical documentation to determine whether or not you meet the above Plan definition of disability. The medical documentation provided in response to our requests covered the time period from March 3, 2004 through January 24, 2007, from Dean A. Drezner, M.D. – Robert Wood Johnson Medical School; Thomas Morley, D.O. – University of Medicine and Dentistry of New Jersey, School of Medicine; Praven Vasoya, D.O. - Washington Township Neurological Associates,

Department of Neurology JFK; George Petruncio, M.D.; Amy M. Evangelisto, M.D. - University of Medicine and Dentistry of New Jersey; George Sanders, Ph.D.; Joseph Zingrone, D.O. - Kennedy Health Systems; Jason Cerutti, D.C. - Dynamic Chiropractic; Gus Slotman, M.D.; Oscar Irigoyan, M.D. - Arthritis Cener, Kennedy Health Systems; Jeff Abrams, M.D. - DiMarino-Kroop-Prieto-Instestinal Associates, P.A; Quest Diagnostics; and Medical Imaging and Telemedicine Company. The records reflect that you have been evaluated by your physicians for a sleep disorder, fatigue, fibromyalgia, difficulty with concentration, depression, numbness and tingling involving the feet, along with foot pain, pain in the knee joints bilaterally, hypertension, morbid obesity, and trigger finger.

In order to clarify your level of functional ability and to help assess whether or not you continue to meet the Plan definition of disability, we obtained a physician review of your file by Paul F. Howard, M.D. Board Certified in Internal Medicine, with subspecialty Board in Rheumatology. Upon reviewing all of the available medical documentation from all medical providers as indicated above, Dr. Howard opined *"Diagnostic studies including an MRI scan of February 18, 2005, with the cervical spine which demonstrating early cervical disc disease at C5-6 and an MRI scan of the brain on February 18, 2005, which was normal. Motor and sensory nerve conduction study on February 22, 2005 was entirely normal. An EKG was present on December 18, 2006, without interpretation. A colonoscopy on December 22, 2006 found hemorrhoids and some diverticulosis and a solitary polyp was removed. Laboratory studies between March 20, 2004, and January 30, 2007, notes repeatedly normal chemistry panels and complete blood count, elevated lipid panels with triglycerides and cholesterol, normal thyroid function, CPK, ANA, rheumatoid factor and other autoantibodies, Lyme serologies and syphilis serologies. Heavy metal testing was negative."*

"The claimant's impairments include osteoarthritis involving the knees with minimal reference to significant pain involving the knees. They were injected in late 2005 on a solitary occasion by Dr. Evangelisto without further references in 2006 of knee discomfort. There is morbid obesity present, sleep apnea and an isolated trigger finger which was treated and responded to therapy by Dr. Evangelisto in September 2005. There is also fatigue syndrome that is self-reported and without other corresponding rheumatic diagnoses to account for functional impairment."

"As described above, peripheral neuropathy, sensory in nature, is present without evidence of significant motor involvement, and as a result should not result in any degree of impairment related to his ability to work. The presence of trigger finger was treated and has not resulted in any degree of impairment, and as such he would be unrestricted in his ability to perform repetitive and fine motor hand activities of gripping, grasping, handling, fingering, feeling, fine finger dexterity, typing and writing. It is beyond the scope of this review to further comment on any functional impairment related to obstructive sleep apnea. Mr. Conrad's primary source of impairment is due to his morbid obesity and presence of osteoarthritis in his knees. This would result in some restrictions in terms of limited walking, and heavy lifting or carrying. Specifically, his morbid obesity and osteoarthritis of the knees would limit his ability to walk occasionally (a third of the day), stand occasionally (a third of the day). More specifically, he would be limited to standing and/or walking up to 30 minutes at a time, 2.5 hours in cumulative total to stand and similar such restrictions would be indicated for walking. Mr. Conrad would not have any specific physical restrictions in terms of his sitting. His lifting and carrying would be restricted to up to 20 pounds occasionally and 10 pounds frequently. Pushing and pulling would be restricted to a maximum of 35 pounds given his morbid obesity."

Overall, no more specific restrictions or limitations would be indicated based upon his primary source of impairment related to his morbid obesity and resultant osteoarthritis of the knees."

"As described, Mr. Conrad is presently working a reduced hours schedule with an average of 20 hours per week. Based upon review of the available medical evidence, he is certainly capable of increasing his work hours to a full-time work schedule, 40 hours a week, 8 hours per day. There is evidence to support that the claimant could increase these hours based on the limited physical abnormalities including the sensory neuropathy or a nonprogressive nature, osteoarthritis of a mild nature as relates to his bilateral knees, and complaints of self-reported fatigue."

Prior to providing the above assessment in his report, Dr. Howard attempted to speak with Dr. Oscar Irigoyan. Calls were made on March 8, 2007, March 23, 2007, and March 26, 2007. Messages requesting return calls were made, but the no return calls were received.

Following the conclusion of the above review, we obtained a Transferable Skills Analysis (TSA) to determine other occupations for which you may qualify. Other occupations were identified based on your ability to function within the restrictions and limitations as described above, and also based on your experience, age, training, and education. Below is a listing of the occupations identified:

<u>Occupation</u>	<u>NJ Annual Wage</u>	<u>National Annual Wage</u>
Sales representative, business Services. (Salary estimate Reflects beginning in a new Industry.)	\$41,060.00 25th percentile	\$32,680.00 25 th percentile
Brokerage clerk.	\$36,380.00 Average	\$38,140.00 Average
CSR – telephonic	\$32,660.00 Average	\$29,680.00 Average
New Accounts clerk, Financial institution	\$28,790.00 Average	\$28,460.00 Average

These occupations can be performed in a variety of work settings and have been identified to exist within your local and regional economy.

Our role in the management of your Long Term Disability (LTD) claim is to determine whether or not your medical condition(s) and the medical information in your file support that you are unable to perform the material and substantial duties of any occupation according to the definition of disability under the Wachovia Group LTD Plan as described on page one of this letter.

Based upon the above explanation of the medical documentation provided for your claim, the medical evidence does not support that your medical conditions continue to be of such severity as to preclude you from performing any occupation. Benefits have continued while we finalized our review; however, benefits beyond May 23, 2007 are denied and your claim is closed effective May 24, 2007. Since you have been receiving Partial LTD benefits based upon the reduced hours schedule you have been working, to calculate your final benefits, we

are in need of written documentation in verification of your earnings for April 2007, as well as for May 1, 2007 through May 23, 2007. Please provide this documentation within thirty days from the date on this letter so that we may finalize any remaining benefits due to you.

If you have a pending Social Security, Workers' Compensation or Pension benefit that is awarded retroactive to your period of disability with Liberty, someone from our Claims Recovery Unit will contact you shortly. Please be advised that you are expected to repay the amount of any disability benefit you received during the time periods that you received income from other sources, per the language of your disability Plan.

This claim determination reflects an evaluation of the claim facts and Plan provisions. We reserve the right to make a determination on any additional information that may be submitted.

Under the Employee Retirement Income Security Act of 1974 (ERISA), you may request a review of this denial by writing to the address below:

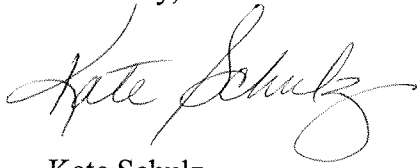
The Liberty Life Assurance Company of Boston
Attn: Kate Schulz
Disability Claims
P.O. Box 242484
Charlotte, NC 28224-9904

The written request for review must be sent within 180 days of the receipt of this letter and state the reasons why you feel your claim should not have been denied. In your request for review please include the following documentation: medical documentation beyond that which has been previously provided, to include current restrictions and limitations with supporting test results (e.g. laboratory reports, reports of radiographic, radiological, imaging, and/or electrodiagnostic study results, and any results of any other form of diagnostic test or study); office notes, consultation reports, hospital records, therapy and/or rehabilitation evaluation and progress notes, pharmacy records; as well as any additional information which you feel will support your claim. You may request to review pertinent claim file documents upon which the denial of benefits was based. If Liberty Life does not receive your written request for review within 180 days of your receipt of this notice, our claim decision will be final, your file will remain closed, and no further review of your claim will be conducted. Under normal circumstances, you will be notified of the final decision within 45 days of the date that your request is received. If special circumstances cause a delay in our decision, you will be notified of the final decision no later than 90 days after your request for review is received.

Nothing in this letter should be construed as a waiver of any Wachovia Corporation rights and defenses under the above captioned Plan, and all of these rights and defenses are reserved to the Plan Sponsor, whether or not they are specifically mentioned herein.

If you have any questions about this determination please call me.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kate Schulz". The signature is fluid and stylized, with the first name "Kate" and last name "Schulz" clearly distinguishable.

Kate Schulz

Sr. Disability Case Manager

Phone No.: (800) 853-7108 Ext. 369

Secure Fax No.: (888) 443-4212

EXHIBIT 33



HAGNER & ZOHLMAN, LLC

ATTORNEYS AT LAW

JOHN A. ZOHLMAN III ◇ *
THOMAS J. HAGNER ◇

LOUIS A. SIMONI *

◇ CERTIFIED BY THE SUPREME COURT
OF NEW JERSEY AS A CIVIL TRIAL
ATTORNEY

* ALSO MEMBER OF PA. BAR

COMMERCE CENTER
1820 CHAPEL AVENUE WEST
SUITE 160
CHERRY HILL, NJ 08002
PHONE 856.663.9090
FAX 856.663.9199

JZOHLMAN@HZLAWPARTNERS.COM
THAGNER@HZLAWPARTNERS.COM
LSIMONI@HZLAWPARTNERS.COM

June 6, 2007

Wachovia HR Service Center
Attn: Scott Hamilton
7201 Hewitt Associates Drive
P.O. Box 563995
Charlotte, NC 28256-3995

Re: Robert Conrad
Claim No. 2021495

Dear Mr. Hamilton:

Reference is made to your attached letter dated May 8, 2007. We are enclosing herewith an Authorization signed by Mr. Conrad which is dated June 5, 2007. The issuance of a subpoena is not possible for the simple reason that there is no legal action pending.

Additionally, I am enclosing correspondence from Liberty Mutual dated May 17, 2007 and would direct your attention to the second page which refers to a calculation of the BEC (Benefits Eligible Compensation). It is our position that the inception date of Mr. Conrad's disability, pursuant to the language of the Long Term Disability Plan, is September 2003. Therefore, I am requesting that you recalculate the BEC for an effective date of September 2003.

Very truly yours,

THOMAS J. HAGNER

TJH/mck
Enc.
cc: Robert Conrad

Wachovia HR Service Center
7201 Hewitt Associates Drive
PO Box 563995
Charlotte, NC 28256-3995



May 8, 2007

WACHOVIA

Thomas J. Hagner, Esq.
Hagner & Zohlman, LLC
Commerce Center
1820 Chapel Avenue West
Suite 160
Cherry Hill, NJ 08002

***Re: Robert Conrad
Claim No. 2021495***

Pursuant to the request issued to Wachovia Corporation, it is not our practice to provide employment/payroll records of employees without a subpoena. Please forward the appropriate documentation and I will respond upon receipt.

If you should have any questions, please feel free to contact me.

Sincerely,

Wachovia Human Resources Service Center
HR BPO Operations
704-646-2073
704-646-3004 - Fax

AUTHORIZATION, RELEASE AND
WAIVER OF PRIVILEGE

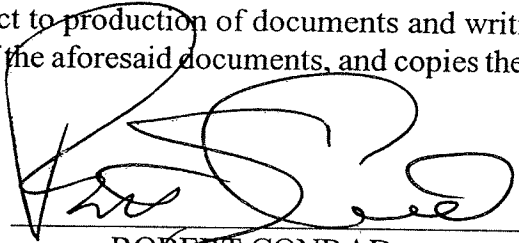
TO: WACHOVIA HR SERVICE CENTER
7201 Hewitt Associates Drive
P.O. Box 563995
Charlotte, NC 28256-3995

You are hereby authorized and directed to release to the law firm of HAGNER & ZOHLMAN, LLC, (and its agents), true and complete copies of any and all of the following:

- (a) Copies of the 2003 Short Term and Long Term SPD's;
- (b) Employment Records for the months of September, October, November and December, 2003.
- (c) Any and all attendance and/or performance records maintained by Mr. Conrad's supervisor;
- (d) Telephone records and/or logs reflecting the volume of calls in which Mr. Conrad participated during the period of September through December, 2003.

All privileges are hereby waived with respect to production of documents and writing and you are released in connection with the disclosure of the aforesaid documents, and copies thereof, to HAGNER & ZOHLMAN, LLC.

DATED: 6-5-07



ROBERT CONRAD



Liberty Life Assurance Company of Boston
Disability Claims
P.O. Box 242484
Charlotte, NC 28224-9904
Phone No.: (800) 853-7108 Ext. 369
Secure Fax No.: (888) 443-4212

May 17, 2007

Hagner & Zohlman, LLC
ATTN: Thomas J. Hagner
Attorneys At Law
1820 Chapel Avenue West
Suite 160
Cherry Hill, NJ 08002-0000

RE: Long Term Disability Benefits
Claimant Name: Robert Conrad
Claim #: 2021495

Dear Thomas J. Hagner:

This is in response to your letter dated April 25, 2007 with regard to Mr. Conrad's claim for Long Term Disability (LTD) benefits under the Wachovia Corporation Group LTD Plan.

As of the date of this letter, Mr. Conrad should have received the LTD benefit payment due him for the month of March. Payment of his April 2007 LTD benefits will be released upon receipt of his earnings for the month of April.

We are in receipt of the medical documentation you included with the above mentioned letter and we appreciate your assistance. We understand Mr. Conrad received treatment for his condition during the time period covered by the medical documentation; however, our investigation on Mr. Conrad's claim has established that the date of disability applicable to his LTD claim is August 3, 2004.

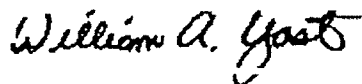
We also acknowledge your reference to pages 66 and 97 of the Wachovia Summary Plan Description pertaining to the Short Term Disability (STD) Plan and the Long Term Disability Plan concerning "intermittent chronic disability". Please note the language that you are referencing defines the requirements for fulfilling the Elimination Period to be eligible for LTD benefits. Specifically, for those employees who are out of work on an intermittent chronic disability. The reason for this explanation is because there are differences in meeting the required Elimination Period when comparing an intermittent chronic disability claim with a non-intermittent chronic disability claim. Please note that we have previously established that Mr. Conrad did meet the Elimination Period defined in the LTD Plan. As such, he began receiving LTD benefits effective February 1, 2005.

With regard to Mr. Conrad's participation in the return to work program, he has received Partial LTD benefits under the "Work Incentive Benefits" provision as described in Article 3.7 of the LTD Plan. He began receiving such benefits under the above provision as of October 10, 2005. Please note points (3) and (4) under Article 3.7 which describe the further reduction of the disability benefits otherwise payable after the Participant has returned to employment of any kind for twelve months. Since Mr. Conrad has been working on a part time basis in excess of twelve months, his Partial LTD benefits have been reduced in accordance with point (3) under Article 3.7 effective November 2006.

With regard to the calculation of Mr. Conrad's Benefits Eligible Compensation (BEC), we must defer all comments and inquiries directly to the Wachovia Corporation, as we are not able to comment on this. The BEC for each employee who files a claim for disability benefits is calculated by the Wachovia Corporation and then provided to Liberty Mutual.

As you are aware, we are currently evaluating Mr. Conrad's eligibility for continued LTD benefits under the Plan change in definition of disability. Mr. Conrad's LTD benefits have continued while we complete our evaluation. We will be contact with you regarding the completion of our evaluation shortly.

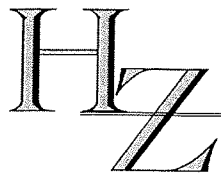
Sincerely,

A handwritten signature in black ink that reads "William A. Yost". The signature is written in a cursive style with a large, stylized 'W' and 'Y'.

William A. Yost
On Behalf of Kathryn Schulz
Phone No.: (800) 853-7108 Ext. 369
Secure Fax No.: (888) 443-4212

EXHIBIT 34

COPY



HAGNER & ZOHLMAN, LLC

ATTORNEYS AT LAW

JOHN A. ZOHLMAN III ◇ *
THOMAS J. HAGNER ◇

LOUIS A. SIMONI *

◇ CERTIFIED BY THE SUPREME COURT
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ATTORNEY

* ALSO MEMBER OF PA. BAR

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JZOHLMAN@HZLAWPARTNERS.COM
THAGNER@HZLAWPARTNERS.COM
LSIMONI@HZLAWPARTNERS.COM

May 23, 2007

William A. Yost
Liberty Life Assurance Company
Disability Claims
P.O. Box 242484
Charlotte, NC 28224-9904

Re: Robert Conrad
Claim No. 2021495

Dear Mr. Yost:

Thank you for your letter of May 17, 2007. I am in the process of reviewing your letter with my client. However, in the meantime I noted that our letter of April 25, 2007 contains a typographical error. Specifically, on page 2 in the third paragraph, it is stated that "The medical records which we are providing show that Mr. Conrad's disability began in December 2003" and then refers to Dr. Petruncio's report which commences with "In September 2003, Mr. Conrad experienced the onset of symptoms..."

So that there is no misunderstanding, please note that the reference in the opening sentence of that paragraph to December 2003, should be **September** 2003.

Very truly yours,

THOMAS J. HAGNER

TJH/mck

EXHIBIT 35



HAGNER & ZOHLMAN, LLC

ATTORNEYS AT LAW

JOHN A. ZOHLMAN III ◇ *
THOMAS J. HAGNER ◇

LOUIS A. SIMONI *

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JZOHLMAN@HZLAWPARTNERS.COM
THAGNER@HZLAWPARTNERS.COM
LSIMONI@HZLAWPARTNERS.COM

July 6, 2007

Wachovia HR Service Center
Attn: Scott Hamilton
7201 Hewitt Associates Drive
P.O. Box 563995
Charlotte, NC 28256-3995

**Re: Robert Conrad
Claim No. 2021495**

Dear Mr. Hamilton:

We have yet to receive a response to our letter of June 6, 2007. I did receive a call from a Mr. Sharpton on June 19, 2007 indicating that the documents would be forwarded promptly. However, it is now July 6, 2007 and the documents have not arrived. Kindly forward this documentation immediately to avoid any further delay.

Very truly yours,

THOMAS J. HAGNER

TJH/bg
cc: Robert Conrad

EXHIBIT 36

Robert S. Conrad

44 Longwood Drive
Sicklerville, NJ 08081

856-875-1739
856-875-6287

Rconrad44@comcast.net

FROM: R. S. CONRAD

To: Liberty Claims
Attn: Kate Schultz

From: Robert S. Conrad
Date Sent: 07/17/2007

Number of Pages: 3

Fax: 888-443-4212

Message:

Kate,

Time Sheet for June. 39 hrs 50 min

I still **have not** receive a paycheck on **May 15, 2007, or April 15, 2007.**

The last LTD check I received was for the month of **March 07**. I received it on May 08, 2007.

NOTE: The BEC calculation for 2008 is due and my records with Wachovia HR do not reflect my production for April May or June. This will reduce my benefits for 2008 unless they are accurately entered into the system.

In summary I have not received a paycheck or a LTD check since March 2007 (LTD paid on May 08, 2007)

Bob

Claim # 2021495

Wachovia Non-Exempt Time Sheet

EMPLOYEE NAME (Please Print)	S.S. # (optional)	WORK PHONE #	DEPARTMENT	RC#	SUPERVISOR NAME	PAY PERIOD
Robert D. Conrad	135-44-1807	800 866 8808	Cheary Hill	CL-40	Stan. Adams	June - 2007

Please indicate weekly scheduled hours: ☐ 5 days/8 hours per day ☐ Other, please specify:

DATE	TIME IN	LUNCH		TIME OUT	REGULAR TIME	ADDITIONAL REG. TIME	OVERTIME	DOUBLE TIME	PTO	OTHER	REASON
		OUT	IN								
6-4-07	8:45			12:45	4:00						Disability
6-6-07	9:00			1:00	4:00						
6-8-07	9:05			1:00	3:55						
6-11-07	9:00			1:00	4:00						
6-13-07	9:00			1:00	4:00						
6-15-07	9:05			1:00	3:55						
6-18-07	8:30			12:30	4:00						
6-19-07	10:00			12:00	2:00						
6-21-07	8:05			12:05	4:00						
6-22-07	10:00			12:00	2:00						
6-25-07	9:00			1:00	4:00						
RECORD YOUR EXACT TIME IN AND OUT					TOTALS:	39.50 hrs					

* Other: Bereavement, Education, Volunteer, Family Care Time, Holiday, Jury Duty, Military, Other

BECAUSE OF THE REQUIREMENT OF FEDERAL & STATE LAWS, IT IS IMPERATIVE THAT THIS RECORD BE FILED IN COMPLETELY AND ACCURATELY. UNDER NO CIRCUMSTANCES MUST TIME WORKED BE UNRECORDED.

I HEREBY CERTIFY THAT THE ABOVE IS AN ACCURATE RECORD OF TIME WORKED DURING THIS PERIOD.

EMPLOYEE SIGNATURE

SUPERVISOR SIGNATURE



* The YTD balances include adjustments and are as of the end of the month.
 ** Denotes eligible functional BEC earnings

PayGroup:	CMC Semimonthly Pay Group	Advice#:	0023377
Pay Begin Date:	07/01/2007	Advice Date:	07/13/2007
Pay End Date:	07/15/2007		

Robert Conrad 44 Longwood Drive Sicklerville, NJ 08081 SSN: XXX-XX-1807	HR Empid: 630720 Department: Cherry Hill CO/RC: CMC 0840175 Pay Rate: \$0.00 Annual	TAX DATA: Marital Status: Married Allowances: 10 Addl Pct: 0.0 Addl Amt: \$0.00
		Federal NJ State M-Joint 10 0.0 \$0.00

HOURS AND EARNINGS

Description	Rate	Current Hours	Earnings	YTD * Hours	Earnings
FA Draw (092*)**			\$1,972.00		\$13,804.00
Commission A/Rate (UL1*)**			\$5,106.18		\$30,502.17
CMG WS Retention Bonus			\$0.00		\$6,444.55
Total		0.00	\$7,078.18	0.00	\$50,750.72

TAXES

Description	Current	YTD *
Fed Withholding	\$472.77	\$7,164.48
Fed FICA - MHI	\$102.63	\$735.89
Fed OASDI/Dis	\$438.84	\$3,146.54
NJ Unempl EE	\$0.00	\$101.75
NJ NJ HCSE	\$0.00	\$0.00
NJ NJ WFDP	\$0.00	\$5.65
NJ NJ SWAF	\$0.00	\$4.66
NJ Withholding	\$136.05	\$2,376.37
NJ MMLIPAF-EMPLOYEE Withholding	\$0.00	\$3.00
Total	\$1,150.29	\$13,539.34

BEFORE-TAX DEDUCTIONS AFTER-TAX DEDUCTIONS

Description	Current	YTD *	Description	Current	YTD *
Total:	\$0.00	\$0.00	Total:	\$0.00	\$0.00

TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current: \$7,078.18	\$7,078.18	\$1,150.29	\$0.00	\$5,927.89
YTD: \$50,750.72	\$50,750.72	\$13,539.34	\$0.00	\$37,211.38

NET PAY DISTRIBUTION

Checking	Account ending in 1848	\$5,927.89
Total		\$5,927.89

* * * COI JICATION RESULT REPORT (MAY. 2. 2 9:12AM) * * *

FAX HEADER: WACHOVIA SECURITIES

TRANSMITTED/STORED FILE MODE	MAY. 2. 2007 9 05AM OPTION	ADDRESS	RESULT	PAGE
298 MEMORY TX		918884434212	E-3) 3)	0/4

REASON FOR ERROR
E-1) HANG UP OR LINE FAIL
E-3) NO ANSWER

E-2) BUSY
E-4) NO FACSIMILE CONNECTION

Wachovia Securities
Stanley P. Hadam, Branch Manager
Five Gfcentro Centre, Suite 400
Marlton, N.J. 08053

856-855-8808 or 800-222-0034 Fax
Number 856-988-2502

Fax

WACHOVIA SECURITIES

Date

5-2

To

KATH SCHULTZ

Fax

888-443-4212 704-357-0737

Pages

From

STAN HADAM

Re:

Boys Country - March

Wachovia Securities LLC

Run Date: 5/2/2007 12:59:32 PM

Compensation Statement **March 2007 - ALL EC Cycles - MTD Preliminary**

CL40 - Conrad, Robert
CL - Cherry Hill/Marlton
Financial Advisor

Comp Hire Date: 05/12/1995
Comp Firm LOS: 11
Comp Industry Start Date: 06/20/1981
Comp Industry LOS: 25

Schedule: Standard No Net

CL40

Gross Commission		\$5,164.16
Payout Eligible Gross		
	-\$300.00	
Net Commission	-\$60.00	

Adjustments

Draw Adjustment reverse March draw ded did not rec draw on 3/15	\$1,972.00
Voluntary Allocation Charge - Flat Recurring - Joanna Moore	-\$100.00
Minimum Wage Draw	-\$1,972.00

Commission Earnings		-\$160.00
---------------------	--	-----------

Deficit Offsets	\$160.00
-----------------	----------

EC EARNINGS		\$.00
-------------	--	--------

Prior Month Deficit Balance	\$.00
-----------------------------	--------

Current Month Deficit	\$160.00
-----------------------	----------

Deficit Repayment	\$.00
-------------------	--------

Deficit Balance	\$160.00
-----------------	----------

EXHIBIT 37



Liberty Life Assurance Company of Boston
Disability Claims
P.O. Box 242484
Charlotte, NC 28224-9904
Phone No.: (800) 853-7108 Ext. 369
Secure Fax No.: (800) 443-4212

July 20, 2007

Hagner & Zohlman, LLC
ATTN: Thomas J. Hagner
1820 Chapel Ave West Suite 160
Cherry Hill, NJ 08002-0000

RE: Long Term Disability Benefits
Claimant Name: Robert Conrad
Claim #: 2021495

Dear Thomas J. Hagner:

This letter is to transmit to you the correspondence we once again received directly from Robert Conrad.

We did inform Mr. Conrad that once he acquired attorney representation on his disability claim, all further communications from that point forward would be handled through his attorney. My understanding from my telephone conversation with you on May 11, 2007 was that you were in agreement with this, and that you also would be advising Mr. Conrad to communicate with us through you.

We note that Mr. Conrad from the latest correspondence received from Mr. Conrad on July 17, 2007 that he continues to assert that the last LTD benefits he received were for the month of March 2007. This is correct. As per my telephone conversation with you on May 11, 2007, and also per our prior letters dated May 23, 2007 and June 18, 2007, we have been awaiting written verification directly from Stan Hadam, Mr. Conrad's manager, or from Wachovia Corporation's Payroll Department confirming his earnings, or lack of earnings, for April 2007 and for the period May 1, 2007 through May 23, 2007. To date we have not received such written verification.

Mr. Conrad previously experienced a month in which he received no earnings. Attached is the documentation his manager, Mr. Hadam, provided in verification of no earnings for the month of March 2007. If we were to once again receive this same type of documentation from Mr. Hadam, or from a Wachovia Corporation Payroll Department representative, we would be able to proceed with determining what LTD benefits may be due to Mr. Conrad for the months of April 2007 and May 2007.

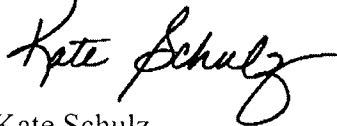
Mr. Hadam's telephone and fax numbers are included on the documentation he previously provided. If they are not sufficiently legible on the enclosed copies, those numbers are:

- Phone: (856) 988-8808
- Fax: (856) 988-2503

As you know, benefits beyond May 23, 2007 are not payable based upon our prior determination as communicated to you in our letter dated May 23, 2007.

If you have further questions, please feel free to contact me.

Sincerely,

A handwritten signature in black ink that reads "Kate Schulz". The signature is written in a cursive, flowing style.

Kate Schulz
Senior Disability Case Manager
Phone No.: (800) 853-7108 Ext. 369
Secure Fax No.: (800) 443-4212

EXHIBIT 38



HAGNER & ZOHLMAN, LLC

ATTORNEYS AT LAW

COPY

JOHN A. ZOHLMAN III ◇ *

THOMAS J. HAGNER ◇

LOUIS A. SIMONI *

◇ CERTIFIED BY THE SUPREME COURT
OF NEW JERSEY AS A CIVIL TRIAL
ATTORNEY

* ALSO MEMBER OF PA. BAR

COMMERCE CENTER
1820 CHAPEL AVENUE WEST
SUITE 160

CHERRY HILL, NJ 08002

PHONE 856.663.9090

FAX 856.663.9199

JZOHLMAN@HZLAWPARTNERS.COM
THAGNER@HZLAWPARTNERS.COM
LSIMONI@HZLAWPARTNERS.COM

August 7, 2007

Wachovia HR Service Center
Attn: Scott Hamilton
7201 Hewitt Associates Drive
P.O. Box 563995
Charlotte, NC 28256-3995

Re: Robert Conrad
Claim No. 2021495

Dear Mr. Hamilton:

Thank you for providing us with certain pay stubs for the months of September through December 2003. I would appreciate it if you could also supply me with copies of the same information for the months of September, October, November and December 2002. It is our position that the BEC should be calculated as of the twelve month period ending September 2003. Therefore, I need the records for the months of September 2002 through December 2002 so that I can determine the earnings for the twelve month period commencing September 2002 and ending September 2003.

Additionally, I would like to draw your attention to additional information that we requested in our letter of April 24, 2007. Specifically, we requested copies of all employment records pertaining to Mr. Conrad's attendance during the months of September, October and November 2003. Kindly provide any and all documentation you have in that regard as well.

Thank you.

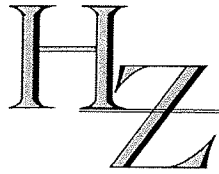
Very truly yours,

THOMAS J. HAGNER

TJH/mck

cc: Robert Conrad

EXHIBIT 39



HAGNER & ZOHLMAN, LLC

ATTORNEYS AT LAW

JOHN A. ZOHLMAN III ♦ *
THOMAS J. HAGNER ♦

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1820 CHAPEL AVENUE WEST
SUITE 160
CHERRY HILL, NJ 08002
PHONE 856.663.9090
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OF NEW JERSEY AS A CIVIL TRIAL
ATTORNEY

* ALSO MEMBER OF PA. BAR

JZOHLMAN@HZLAWPARTNERS.COM
THAGNER@HZLAWPARTNERS.COM

September 10, 2007

Wachovia HR Service Center
Attn: Scott Hamilton
7201 Hewitt Associates Drive
P.O. Box 563995
Charlotte, NC 28256-3995

**Re: Robert Conrad
Claim No. 2021495**

Dear Mr. Hamilton:

Reference is made to our letter of August 7, 2007. To date we have not received a response. It is imperative that we receive this information immediately.

Very truly yours,

THOMAS J. HAGNER

TJH/bg
cc: Robert Conrad

EXHIBIT 40



HAGNER & ZOHLMAN, LLC

ATTORNEYS AT LAW

COPY

JOHN A. ZOHLMAN III ◇ *
THOMAS J. HAGNER ◇

MATTHEW W. HUTNICK *

◇ CERTIFIED BY THE SUPREME COURT
OF NEW JERSEY AS A CIVIL TRIAL
ATTORNEY

* ALSO MEMBER OF PA. BAR

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FAX 856.663.9199

JZOHLMAN@HZLAWPARTNERS.COM
THAGNER@HZLAWPARTNERS.COM
MHUTNICK@HZLAWPARTNERS.COM

September 26, 2007

Wachovia HR Service Center
Attn: Scott Hamilton
7201 Hewitt Associates Drive
P.O. Box 563995
Charlotte, NC 28256-3995

Re: Robert Conrad
Claim No. 2021495

Dear Mr. Hamilton:

Despite the fact that we have issued multiple written requests for Mr. Conrad's attendance records since April 24, 2007, we have yet to receive the requested information. Accordingly, we must conclude that no such attendance records exist.

For your reference, we wrote to you on April 24, 2007; June 6, 2007; July 6, 2007; August 7, 2007; and September 10, 2007.

Again, given the fact that our multiple requests for Mr. Conrad's attendance records have been ignored, we have no alternative but to conclude that no such attendance records exist.

Very truly yours,

THOMAS J. HAGNER

TJH/mck
cc: Robert Conrad

EXHIBIT 41



HAGNER & ZOHLMAN, LLC

ATTORNEYS AT LAW

COPY

JOHN A. ZOHLMAN III ◇ *
THOMAS J. HAGNER ◇

◇ CERTIFIED BY THE SUPREME COURT
OF NEW JERSEY AS A CIVIL TRIAL
ATTORNEY

* ALSO MEMBER OF PA. BAR

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PHONE 856.663.9090
FAX 856.663.9199

JZOHLMAN@HZLAWPARTNERS.COM
THAGNER@HZLAWPARTNERS.COM

November 13, 2007

Liberty Life Assurance Company
Attn: Kate Schulz, Sr. Disability Case Manager
Disability Claims
P.O. Box 242484
Charlotte, NC 28224-9904

Re: Robert Conrad
Claim No. 2021495

Dear Ms. Schulz:

Please consider this letter as an appeal regarding your denial of long-term disability benefits to Mr. Conrad. This appeal relates both to the amount of benefits previously received as well as the termination of benefits as set forth in your letter of May 23, 2007. Initially, we incorporate herein our letter of May 25, 2007 together with all the attachments to that letter. According to the disability plan, the date of disability applicable to Mr. Conrad's claim is September, 2003.

Mr. Conrad was out of work on September 8, 2003. He saw Dr. Petruncio on that date and was unable to work for the rest of that week. He saw Dr. Petruncio again on the following Monday, September 15, 2003 in which he did not work either.

He worked a full day on September 16th, 17th and 18th and then only a half day on Friday, September 19th when he saw Dr. Petruncio again.

Mr. Conrad did not work on September 23rd and then only a half day on the 24th which was the day that he left in order to do some lab work. He was out on the 25th as well as he was on September 30th.

In October, he was out on the 2nd, the 7th (visit with Dr. Petruncio), the 9th (more lab work), the 10th, 13th, 15th, 16th and 17th, 20th, 22nd, 24th and 28th.

Liberty Life Assurance Company
November 13, 2007
Page 2

In November he worked part of the day on November 6th (more lab work), and was out the 10th, 12th, 13th, 17th, 19th, 20th, and 21st.

On November 24th, he reported for work but in the middle of a meeting he began sweating uncontrollably and indicated that he had to leave the meeting and go to the hospital which he did. He was hospitalized through Friday the 28th. He was out again on December 1st (visit with Dr. Petruncio), and also the 2nd, 3rd, 5th, 8th, 12th, 16th, 18th, and 22nd.

Therefore the onset date of Mr. Conrad's disability for purposes of the LTD Plan at issue is September, 2003 and his benefits should be recalculated accordingly.

Regarding Mr. Conrad's disability I enclose herewith a medical report from Mr. Conrad's primary treating physician Dr. Petruncio dated July 17, 2007 as well as a report from a specialist to whom he was referred, Dr. James Dwyer whose report is dated July 19, 2007.

Dr. Petruncio confirms that "It was around September 8, 2003, when Robert started to experience symptoms such as spontaneous diaphoresis (of unknown etiology, depression, multiple myalgis, sleep apnea and chronic fatigue. These symptoms persisted and resulted in weekly visits and led to hospitalizations to diagnose his condition."

Dr. Petruncio further explains that Mr. Conrad "continues to complain of multiple symptoms including chronic fatigue, decreased concentration, memory loss, and outbreaks of diaphoresis, which is still unexplained." Dr. Petruncio recommends that Mr. Conrad not work a full schedule and essentially limit his work to approximately 3 half-days per week.

Both Dr. Petruncio and Dr. Dwyer, as well as multiple other specialists including those at Jefferson Hospital and Cooper Hospital have diagnosed Mr. Conrad as suffering from fibromyalgia, among other things.

Fibromyalgia is a complex, chronic condition which causes widespread pain and fatigue as well as a variety of other symptoms. The fatigue of fibromyalgia varies from person to person and ranges from a mild tired feeling to the exhaustion of a severe flu-like illness.

Typically patients suffer from one or more of the following in addition to pain and fatigue:

- (a) Sleep disturbances
- (b) Cognitive disorders
- (c) Depression
- (d) Anxiety

The medical records submitted relating to Mr. Conrad clearly establishes that Mr. Conrad is indeed disabled as a result of his fibromyalgia. If you contend that Mr. Conrad is not suffering from the fatigue, memory and other concentration problems which he has articulated,

kindly indicate specifically and in detail why either you do not believe that Mr. Conrad is suffering

Liberty Life Assurance Company

November 13, 2007

Page 3

from these symptoms or why you believe that in spite of the symptoms Mr. Conrad is capable of working a fulltime job on a regular and reliable basis.

We are supplying in connection with this appeal records of compensation from April 2007 through October 2007. Reference is made to your letter of July 20, 2007 indicating that you had not received confirmation from Wachovia Corporation's payroll department confirming Mr. Conrad's lack of earnings for April 2007 and May 2007.

Enclosed for your reference is a copy of a fax from Mr. Conrad to you dated May 2, 2007 enclosing an accounting which Mr. Haddam gave to him proving that he did not receive a check.

The attached earnings indicate the compensation received and not received by Mr. Conrad on a monthly basis. The schedules which show "Commission Date" with the last day of each month reflect compensation earned by Mr. Conrad on a monthly basis under the category "MTD Net".

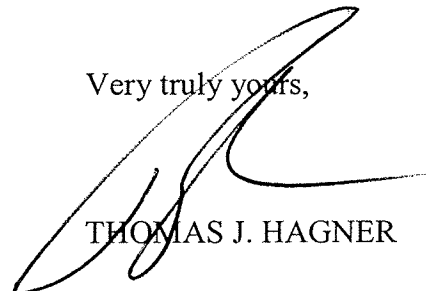
The schedule with the commission date of April 30, 2007 represents April production which would be paid in May. You will note the \$0.00 sum under the category MTD Net.

Similarly, the schedule with the commission date of March 31, 2007 reflects a negative \$60.00 paid in April for March production. Therefore, the attached records demonstrate unequivocally that Mr. Conrad's compensation for March and April 2007 was a negative \$60.00.

Under the circumstances, it is clear that Mr. Conrad's benefits need to be recalculated in order to take into consideration the higher BEC based upon the onset date of the disability of September 2003. Additionally, his benefits need to be reinstated effective April 2007.

When additional compensation information is received, we will supplement this appeal accordingly.

Very truly yours,



THOMAS J. HAGNER

TJH/bg/mck

Enclosure

cc: Robert Conrad

GEORGE J. PETRUNCIO, M.D., P.A.
FRIES MILL PAVILION
186 FRIES MILL ROAD, SUITE E-1
TURNERSVILLE, NEW JERSEY 08012
TELEPHONE: (856) 875-7700
FAX: (856) 262-0428

July 17, 2007

Wachovia Securities, LLC
Five Greentree Centre, Ste. 400
Marlton NJ 08053

Re: Robert Conrad

Mr. Stanley Hadam

Robert Conrad has been a patient of this office since 1994. Prior to September 2003 he was healthy and worked as a successful stockbroker. It was around September 8, 2003, when Robert started to experience symptoms such as spontaneous diaphoresis (of unknown etiology), depression, multiple myalgias, sleep apnea, and chronic fatigue. These symptoms persisted and resulted in weekly visits and led to hospitalizations to diagnose his condition.

In March of 2004, he was diagnosed with sleep apnea by Dr. Thomas Morley. Although this new diagnosis was an important finding, Mr. Conrad continued to experience various symptoms with little to no improvement. His overall health continued to decline and further diagnostic tests including plasmaphoresis, spinal tap, frequent bloodwork, and radiology tests including MRI and Ct studies were performed. He did experience some improvement with the plasmaphoresis. During this time, he was referred to multiple specialists, and in July of 2005 was given a diagnosis of fibromyalgia and reactive depression resulting from his disability and continued symptoms of unknown etiology.

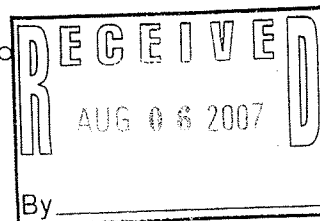
To date, Robert continues to complain of multiple symptoms including chronic fatigue, decreased concentration, memory loss, and outbreaks of diaphoresis, which is still unexplained. He uses a CPAP machine daily for treatment of his sleep apnea and does aqua therapy twice daily for his multiple myalgias. He currently treats with a chiropractor twice a week with minimal improvement.

At this point he should limit his work schedule to no more than three days a week with a limit of four to five hours a day, as working a full time schedule may be detrimental to his health.

If you are in need of any additional information, please do not hesitate to contact me at my office.

Respectfully,

George J. Petrucio M.D.





Arthritis, Rheumatic & Back Disease Associates, P.A.
Greentree Osteoporosis Center

Fellows in the American College of Rheumatology

Sheldon D. Solomon, M.D., F.A.C.P.
Brian L. Grimmer, M.D.
Kenneth H. Maurer, M.D.
James P. Dwyer, D.O.
Adrienne R. Hollander, M.D.
Arielle S. Silver, M.D.
Stephen Burnstein, D.O.

2309 Evesham Road, Suite 101
Voorhees, NJ 08043
856-424-5005
Fax 856-424-4716

3201 Route 38 West, Suite 103
Mount Laurel, NJ 08054
856-235-0001
Fax 856-235-0201

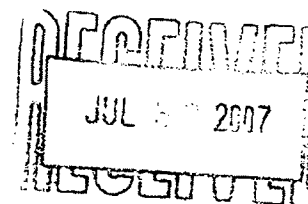
July 19, 2007

Dr. George Petruncio
188 Fries Mill Rd #E1
Turnersville, NJ 08012

Re: Robert Conrad

Dear George,

Thanks for the opportunity to see your patient, Robert Conrad, a very pleasant gentleman who has been relatively incapacitated since 2003 with a myriad of unusual symptoms. He relates his bug bite during a trip to New York in August, 2003, followed by weight loss, low grade fevers, myalgias, arthralgias and after a negative work-up he went through "massive antibiotics" without any significant improvement. He continued with symptoms of fatigue, memory loss, aches and pains, diarrhea and hyperhydrosis which is localized to the head and scalp region. He has been diagnosed in March of 2004 with severe sleep apnea and has been using C-PAP for this. Despite this he continues to have significant sleep disturbances. He has been evaluated by multiple physicians, rheumatologists, neurologists and continues to be seen on a regular basis by pulmonologists and chiropractors. Prior visits to rheumatology at Jefferson and Cooper have resulted in diagnoses of fibromyalgia but no specific autoimmune condition. Laboratory studies that have been thorough in the past have failed to demonstrate any serologic abnormalities to suggest either infection or autoimmune condition. Bob indicates he has been treated for depression most recently with Lexapro. He has been on multiple medications for fibromyalgia in the past including Amitriptyline as well as Flexeril without any benefit. He is presently taking ibuprofen 2000 mg daily which



Dr. George Petruncio

Page two

Re: Robert Conrad

July 19, 2007

provides some minimal benefit. He does have some chronic GI symptoms with chronic abdominal discomfort and has had a colonoscopy as recent as December of 2006 which was relatively unremarkable.

Physical examination shows Bob to be 324 lbs and a height of 5'11". HEENT, cardiopulmonary and abdominal examination are all unremarkable with the exception of mild diffuse abdominal tenderness. Extremity examination shows good range of motion in both upper and lower extremities without any evidence of arthropathy or synovitis. He does have a small pustule on his right dorsal hand which looks to be an "ingrown hair" rather than something that would be the result of hematologic spread of infection.

Neurologic examination shows some light touch sensation changes on his feet. He does have passive congestion of the veins about his lower extremities and about his feet but pulses are normal in both upper and lower extremities.

In review of all Bob's data, laboratory and x-ray results, it certainly is clear that he has some yet undiagnosed systemic disorder that causes manifestations as mentioned above. Although he clearly does have fibromyalgic symptoms, I feel that these are largely a secondary manifestation of the primary condition as well as perhaps aggravated by sleep apnea which continues to be an issue.

I had a long discussion with Bob about this indicating that it is doubtful that one would be able to come up with any surprising or enlightening findings particularly in light of the thorough work-up that you have done, however, I have suggested we recheck a few serologic studies including Sjogren's antibodies and extractable nuclear antigen antibodies to see if there is anything that would suggest an occult rheumatologic process. If these studies are normal or negative, I suggested Bob continue to work with you and with his pulmonary consultant to try to help better manage his sleep apnea problem and continue to keep an open mind about the possibilities of some other systemic process. It is doubtful infectious etiologies would explain this in light of the

Dr. George Petruncio

Page three

Re: Robert Conrad

July 19, 2007

normal laboratory studies particularly his normal blood count. It is also unlikely this would be an occult malignancy since it has been existing for four years without any manifestations of other clues. Endocrine abnormalities have been fully evaluated and the only other thought is some neurologic process that would trigger periodic hyperhidrosis.

I appreciate your allowing me to participate in his care. I will be in touch with you in regard to lab results.

Sincerely,


James P. Dwyer, DO

JPD:G133tpj

George -
2nd studies -
ANA
Ds DNA
Sm, RNA Ab
SSA
SSB
- culture - gr+
suspect S.

17
11



QUEST DIAGNOSTICS INCORPORATED
CLIENT SERVICE 800.825.7330

SPECIMEN INFORMATION
SPECIMEN: NE740715L
REQUISITION: 0001674
LAB REF: TUU

COLLECTED: 07/19/2007 14:21 ET
RECEIVED: 07/19/2007 18:26 ET
REPORTED: 07/26/2007 07:53 ET

PATIENT INFORMATION
CONRAD, ROBERT

DOB: 02/26/1955 AGE: 52
GENDER: M

ID:
PHONE: 856.875.1739

REPORT STATUS FINAL REPRINT

ORDERING PHYSICIAN
BURNSTEIN, STEPHEN

CLIENT INFORMATION
N08054017 ML11
SOLOM, GRIMMETT & MAURER
SUITE 103
3201 ROUTE 38
MOUNT LAUREL, NJ 08054-9721

Test Name	In Range	Out of Range	Reference Range	Lab
ANA SCREEN EIA W/REFL				
TITER IFA				QHO
ANA SCREEN				
DNA (DS) ANTIBODIES	NEGATIVE <30		NEGATIVE IU/mL	QHO
INTERPRETATION				
< 30 NEGATIVE				
0-60 LOW POSITIVE				
61-200 POSITIVE				
> 200 STRONG POSITIVE				
SM AND SM/RNP ANTIBODIES				
SM ANTIBODY	<1.00		index	QHO

REFERENCE RANGE

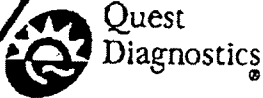
INDEX VALUES < OR = 1.00 = NEGATIVE
INDEX VALUES > 1.00 = POSITIVE

THE PRESENCE OF SM ANTIBODIES IS HIGHLY SPECIFIC FOR SLE.
SM ANTIBODIES ARE PRESENT IN 30% OF SLE PATIENTS.

CONRAD, ROBERT - NE740715L

Page 1 - Continued on Page 2

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07/26/07 09:26 04955060 1/4



QUEST DIAGNOSTICS INCORPORATED

 COLLECTED: 07/19/2007 14:21 ET
 REPORTED: 07/26/2007 07:53 ET

 PATIENT INFORMATION
 CONRAD, ROBERT

 DOB: 02/26/1955 AGE: 52
 GENDER: M

REPORT STATUS FINAL REPRINT

 ORDERING PHYSICIAN
 BURNSTEIN, STEPHEN

Test Name	In Range	Out of Range	Reference Range	Lab
SM/RNP ANTIBODY	<1.00		index	

REFERENCE RANGE

 INDEX VALUES < OR = 1.00 = NEGATIVE
 INDEX VALUES > 1.00 = POSITIVE

RNP ANTIBODIES ARE FOUND IN MIXED CONNECTIVE TISSUE DISEASE (MCTD), SLE, RA, SJOGREN'S SYNDROME, PROGRESSIVE SYSTEMIC SCLEROSIS, AND DRUG INDUCED LE. THE PRESENCE OF RNP ANTIBODIES AND THE ABSENCE OF SM AND DS DNA ANTIBODIES STRONGLY SUGGESTS MCTD, WHILE THE ABSENCE OF RNP USUALLY RULES OUT MCTD.

 SJOGREN'S ANTIBODIES
 (SSA, SSB)

SJOGRENS ANTIBODIES (SSA) <1.00 index QHO

REFERENCE RANGE

 INDEX VALUES < OR = 1.00 = NEGATIVE
 INDEX VALUES > 1.00 = POSITIVE

SJOGRENS ANTIBODIES (SSB) <1.00 index

REFERENCE RANGE

 INDEX VALUES < OR = 1.00 = NEGATIVE
 INDEX VALUES > 1.00 = POSITIVE

ANTIBODIES TO SSA (RO) AND SSB (LA) ARE OBSERVED WITH THE HIGHEST FREQUENCY IN SJOGREN'S SYNDROME, ALTHOUGH THESE ANTIBODIES ARE ALSO FOUND IN A SIGNIFICANT PERCENTAGE OF PATIENTS WITH SLE.

=====

CONRAD, ROBERT - NE740715L

Page 2 - Continued on Page 3

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 07/26/07 09:26 R4955860 2/4



QUEST DIAGNOSTICS INCORPORATED

COLLECTED: 07/19/2007 14:21 ET
REPORTED: 07/26/2007 07:53 ET

PATIENT INFORMATION
CONRAD, ROBERT

DOB: 02/26/1955 AGE: 52
GENDER: M

REPORT STATUS FINAL REPRINT

ORDERING PHYSICIAN
BURNSTEIN, STEPHEN

CULTURE, ANAEROBIC BACTERIA W/GRAM STAIN

QHO

MICRO NUMBER: 70522928
TEST STATUS: FINAL
SPECIMEN SOURCE: HAND
SPECIMEN COMMENTS: ADEQUATE
GRAM STAIN: MODERATE GRAM POSITIVE COCCI

RESULT: NO ANAEROBES ISOLATED.
CULTURE FOR ANAEROBES REQUESTED. IN THE COURSE OF
TESTING, AEROBIC ORGANISM(S) ISOLATED. PLEASE
NOTIFY THE LABORATORY WITHIN THREE DAYS IF
FURTHER IDENTIFICATION AND SUSCEPTIBILITIES ARE
DESIRED.

HARD COPY TO FOLLOW

PERFORMING LABORATORY INFORMATION

QHO QUEST DIAGNOSTICS-HORSHAM, 900 BUSINESS CENTER DRIVE, HORSHAM, PA 19044
Laboratory Director: HERMAN HURWITZ, MD, FCAP, CLIA: 39D0204404

CONRAD, ROBERT - NE740715L

Page 3 - End of Report



Robert S. Conrad

44 Longwood Drive
Sicklerville, NJ 08081

856-875-1739
856-875-6287

Rconrad44@comcast.net

FAX TRANSMITTAL FORM

To: Liberty Claims
Attn: Kate Schultz

From: Robert S. Conrad
Date Sent: 05/02/2007

Number of Pages: 4

Fax: 888-443-4212

Message:

Kate,

As you know from my previous fax on 04/12/2007 I did not receive a paycheck nor a statement

On April 15, 2007.

Today, May 02, 2007, Stan gave me this accounting sheet to PROVE to YOU I did NOT receive a check.

ALSO, if you send correspondence to my attorney I would think I would be entitled to a carbon copy.

YOU continue to act as though I am a non intelligent person that does not deserve any communication,

I can only tell you that I resent being treated this way.

Bob Claim # 2021495

Cc: Thomas Hagner, esq.



WACHOVIA

* The YTD balances include adjustments and are as of the end of the month.
 ** Denotes eligible functional BEC earnings

PayGroup:	CMC Semimonthly Pay Group	Advice#:	0020337
Pay Begin Date:	01/01/2007		
Pay End Date:	01/15/2007	Advice Date:	01/12/2007

Robert Conrad 44 Longwood Drive Sicklerville, NJ 08081 SSN: XXX-XX-1807	HR Emplid: 630720 Department: Cherry Hill CO/RC: CMC 0840175 Pay Rate: \$0.00 Annual	TAX DATA: Marital Status: Married Allowances: 10 Addl Pct: 0.0 Addl Amt: \$0.00	Federal M-Joint 10 0.0 \$0.00	NJ State M-Joint 10 0.0 \$0.00
--	---	--	--	---

HOURS AND EARNINGS

Description	Current			YTD *	
	Rate	Hours	Earnings	Hours	Earnings
FA Draw (092*)**			\$1,972.00		\$1,972.00
Commission A/Rate (UL1*)**			\$500.25		\$500.25
Total		0.00	\$2,472.25	0.00	\$2,472.25

TAXES

	Current	YTD *
Fed Withholding	\$22.20	\$22.20
Fed FICA - MHI	\$35.85	\$35.85
Fed OASDI/Dis	\$153.28	\$153.28
NJ Unempl EE	\$9.46	\$9.46
NJ NJ HCSF	\$0.00	\$0.00
NJ NJ WFDP	\$0.62	\$0.62
NJ NJ SWAF	\$0.43	\$0.43
NJ Withholding	\$26.94	\$26.94
NJ MMLIPAF-EMPLOYEE Withholding	\$3.00	\$3.00
Total	\$251.78	\$251.78

BEFORE-TAX DEDUCTIONS

AFTER-TAX DEDUCTIONS

Description	Current	YTD *	Description	Current	YTD *
Total:	\$0.00	\$0.00	Total:	\$0.00	\$0.00

TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current: \$2,472.25	\$2,472.25	\$251.78	\$0.00	\$2,220.47
YTD: \$2,472.25	\$2,472.25	\$251.78	\$0.00	\$2,220.47

NET PAY DISTRIBUTION

Checking	Account ending in 1848	\$2,220.47
Total		\$2,220.47

First Clearing, LLC

Monthly Rep Production Statement**For the Production Month Ending December 31, 2006****Final****CL40 CONRAD SR ROBERT STEPHEN Financial Advisor****Pay Group: FA - Financial Advisor****Branch: Cherry Hill/Marlton Branch Code: CL****Division: Region: Northeast****MTD Net Eligible Production Calculation**

	Total Gross	% Total Gross	Net Eligible Production	Net Pay %
Amount payable at 50%	1,827.89		913.95	50.00%
Amount payable at 20% (93.59% x \$9500)	8,891.50		1,778.30	20.00%
Sub Total	10,719.39	93.59%	2,692.25	25.12%
Money Market	445.91		00.00	0.00%
Small Ticket & Employee Disc > 60 %	287.68		00.00	0.00%
Sub Total	733.59	6.41%	00.00	0.00%
Net Eligible Production	11,452.98	100.00%	2,692.25	23.51%

Memo Item:

EOA

(120.00)

Subtotal- For internal use only

2,572.25**22.46%**

- 100-00 TO J Moore

1-2007 Gross 2472.25

Compensation Statement
January 2007 - ALL EC Cycles - MTD Final

CL40 - Conrad, Robert
CL - Cherry Hill/Marilton
Financial Advisor

Comp Hire Date: 05/12/1995
Comp Firm LOS: 11
Comp Industry Start Date: 06/20/1981
Comp Industry LOS: 25

Schedule: Growth Plan

CL40

Gross Commission		\$18,734.39
Payout Eligible Gross		\$18,425.95
Net Commission	\$3,512.15	
Net Over Hurdle	\$2,508.42	
State Renewal Fees	-\$285.00	

Adjustments

Voluntary Allocation Charge - Flat Recurring - Joanna Moore	-\$100.00
Minimum Wage Draw	-\$1,972.00

Commission Earnings	\$3,663.57
----------------------------	-------------------

EC EARNINGS	\$3,663.57
--------------------	-------------------

<u>Commission Date</u>	<u>Associate Name</u>	<u>Comp Cat Code</u>	<u>Comp Cat Name</u>	<u>MTD Gross</u>	<u>MTD Net</u>	<u>YTD Gross</u>	<u>YTD Net</u>
January 31, 2007	Conrad, Robert						
		479	3RD PARTY MMKT TRAIL	\$140.19	\$0.00	\$140.19	\$0.00
		409	ANNUITIES-SPECIAL	\$3,435.90	\$687.28	\$3,435.90	\$687.28
		002	COMMON STOCK	\$893.44	\$42.00	\$893.44	\$42.00
		101	CORPORATE BONDS	\$2,470.62	\$494.13	\$2,470.62	\$494.13
		353	CSG CLIENT DIRECTED	\$1,255.59	\$251.16	\$1,255.59	\$251.16
		354	CSG MUTUAL FUND WRAP	(\$29.39)	(\$5.88)	(\$29.39)	(\$5.88)
		115	CTF OF DEPOSIT	\$445.60	\$89.12	\$445.60	\$89.12
		201	GOVERNMENT BONDS	\$2,170.80	\$434.16	\$2,170.80	\$434.16
		411	INSURANCE VIA SBIA	\$35.85	\$7.18	\$35.85	\$7.18
		478	MMMF ADMIN FEE	\$351.39	\$0.00	\$351.39	\$0.00
		454	MUTUAL FD 12B-1 TRL	\$2,559.40	\$512.00	\$2,559.40	\$512.00
		451	MUTUAL FUNDS	\$5,005.00	\$1,001.00	\$5,005.00	\$1,001.00
			Net Over-Hurdle Payout (Net				
			Eligible Production Over	\$0.00	\$2,508.42	\$0.00	\$2,508.42
			NHRD Hurdle)	\$0.00	(\$285.00)	\$0.00	(\$285.00)
			643 STATE RENEWAL FEES	\$18,734.39	\$5,735.57	\$18,734.39	\$5,735.57



WACHOVIA

* The YTD balances include adjustments and are as of the end of the month.
 ** Denotes eligible functional BEC earnings

PayGroup:	CMC Semimonthly Pay Group	Advice#:	0020900
Pay Begin Date:	02/01/2007		
Pay End Date:	02/15/2007	Advice Date:	02/15/2007

Robert Conrad
 44 Longwood Drive
 Sicklerville, NJ 08081
SSN: XXX-XX-1807

HR Emplid: 630720
Department: Cherry Hill
CO/RC: CMC 0840175
Pay Rate: \$0.00 Annual

TAX DATA:	Federal	NJ State
Marital Status:	Married	M-Joint
Allowances:	10	10
Addl Pct:	0.0	0.0
Addl Amt:	\$0.00	\$0.00

HOURS AND EARNINGS

Description	Current		YTD *	
	Rate	Hours	Earnings	Earnings
FA Draw (092*)**			\$1,972.00	\$3,944.00
Commission A/Rate (UL1*)**			\$3,663.57	\$4,163.82
Total		0.00	\$5,635.57	\$8,107.82

TAXES

	Current	YTD *
Fed Withholding	\$256.38	\$278.58
Fed FICA - MHI	\$81.71	\$117.56
Fed OASDI/Dis	\$349.40	\$502.68
NJ Unempl EE	\$21.55	\$31.01
NJ NJ HCSF	\$0.00	\$0.00
NJ NJ WFDP	\$1.41	\$2.03
NJ NJ SWAF	\$0.99	\$1.42
NJ Withholding	\$92.16	\$119.10
NJ MMLIPAF-EMPLOYEE Withholding	\$0.00	\$3.00
Total	\$803.60	\$1,055.38

BEFORE-TAX DEDUCTIONS

AFTER-TAX DEDUCTIONS

Description	Current	YTD *	Description	Current	YTD *
Total:	\$0.00	\$0.00	Total:	\$0.00	\$0.00

	TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current:	\$5,635.57	\$5,635.57	\$803.60	\$0.00	\$4,831.97
YTD:	\$8,107.82	\$8,107.82	\$1,055.38	\$0.00	\$7,052.44

NET PAY DISTRIBUTION

Checking	Account ending in 1848	\$4,831.97
Total		\$4,831.97

Compensation Statement
February 2007 - ALL EC Cycles - MTD Final

CL40 - Conrad, Robert
CL - Cherry Hill/Marilton
Financial Advisor

Comp Hire Date: 05/12/1995
Comp Firm LOS: 11
Comp Industry Start Date: 06/20/1981
Comp Industry LOS: 25

Schedule: Growth Plan

CL40

Gross Commission		\$12,132.73
Payout Eligible Gross		\$12,074.73
Net Commission	\$2,315.93	
Net Over Hurdle	\$618.93	

Adjustments

Voluntary Allocation Charge - Flat Recurring - Joanna Moore	-\$100.00
Minimum Wage Draw	-\$1,972.00

Commission Earnings	\$862.86
----------------------------	-----------------

EC EARNINGS	\$862.86
--------------------	-----------------

February 28, 2007	Conrad, Robert				
479 TRAIL	\$77.66	\$0.00	\$217.85	\$0.00	
409 ANNUITIES-SPECIAL	\$67.80	\$13.57	\$3,503.70	\$700.85	
459 CLOSED END MF	\$100.00	\$5.00	\$100.00	\$5.00	
002 COMMON STOCK	\$96.62	\$4.33	\$990.06	\$46.33	
101 CORPORATE BONDS	\$7,164.72	\$1,432.97	\$9,635.34	\$1,927.10	
353 DIRECTED	\$1,035.56	\$207.15	\$2,291.15	\$458.31	
354 WRAP	\$0.00	\$0.00	(\$29.39)	(\$5.88)	
115 CTF OF DEPOSIT	\$27.00	\$5.40	\$472.60	\$94.52	
201 GOVERNMENT BONDS	\$0.00	\$0.00	\$2,170.80	\$434.16	
411 INSURANCE VIA SBIA	\$1.73	\$0.35	\$37.58	\$7.53	
478 MMMF ADMIN FEE	\$268.01	\$0.00	\$619.40	\$0.00	
454 MUTUAL FD 12B-1 TRL	\$733.08	\$146.65	\$3,292.48	\$658.65	
451 MUTUAL FUNDS	\$2,240.05	\$448.01	\$7,245.05	\$1,449.01	
(Net Eligible Production					
NHRD Over Hurdle)	\$0.00	\$618.93	\$0.00	\$3,127.35	
051 OPTIONS	\$58.00	\$0.00	\$58.00	\$0.00	
643 FEES	\$0.00	\$0.00	\$0.00	(\$285.00)	
110 BONDS	\$262.50	\$52.50	\$262.50	\$52.50	
	\$12,132.73	\$2,934.86	\$30,867.12	\$8,670.43	



WACHOVIA

* The YTD balances include adjustments and are as of the end of the month.
 ** Denotes eligible functional BEC earnings

PayGroup:	CMC Semimonthly Pay Group	Advice#:	0023780
Pay Begin Date:	03/01/2007		
Pay End Date:	03/15/2007	Advice Date:	03/15/2007

Robert Conrad
 44 Longwood Drive
 Sicklerville, NJ 08081

SSN: XXX-XX-1807

HR Emplid: 630720
Department: Cherry Hill
CO/RC: CMC 0840175
Pay Rate: \$0.00 Annual

TAX DATA:	<u>Federal</u>	<u>NJ State</u>
Marital Status:	Married	M-Joint
Allowances:	10	10
Addl Pct:	0.0	0.0
Addl Amt:	\$0.00	\$0.00

HOURS AND EARNINGS

Description	Current		YTD *	
	Rate	Hours	Earnings	Earnings
Commission A/Rate (UL1*)**			\$862.86	\$5,026.68
FA Draw (092*)**			\$0.00	\$3,944.00
Total		0.00	\$862.86	\$8,970.68

TAXES

	Current	YTD *
Fed Withholding	\$0.00	\$278.58
Fed FICA - MHI	\$12.51	\$130.07
Fed OASDI/Dis	\$53.50	\$556.18
NJ Unempl EE	\$3.30	\$34.31
NJ NJ HCSF	\$0.00	\$0.00
NJ NJ WFDP	\$0.21	\$2.24
NJ NJ SWAF	\$0.15	\$1.57
NJ Withholding	\$0.44	\$119.54
NJ MMLIPAF-EMPLOYEE Withholding	\$0.00	\$3.00
Total	\$70.11	\$1,125.49

BEFORE-TAX DEDUCTIONS

AFTER-TAX DEDUCTIONS

Description	Current	YTD *	Description	Current	YTD *
Total:	\$0.00	\$0.00	Total:	\$0.00	\$0.00

TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current: \$862.86	\$862.86	\$70.11	\$0.00	\$792.75
YTD: \$8,970.68	\$8,970.68	\$1,125.49	\$0.00	\$7,845.19

NET PAY DISTRIBUTION

Checking	Account ending in 1848	\$792.75
Total		\$792.75

<u>Commission Date</u>	<u>Associate Name</u>	<u>Comp Cat Code</u>	<u>Comp Cat Name</u>	<u>MTD Gross</u>	<u>MTD Net</u>	<u>YTD Gross</u>	<u>YTD Net</u>
March 31, 2007	Conrad, Robert						
		479	3RD PARTY MMKT TRAIL	\$142.56	\$0.00	\$360.41	\$0.00
		409	ANNUITIES-SPECIAL	\$62.79	\$0.00	\$3,566.49	\$700.85
		459	CLOSED END MF	\$0.00	\$0.00	\$100.00	\$5.00
		002	COMMON STOCK	\$1,573.84	\$0.00	\$2,563.90	\$46.33
		101	CORPORATE BONDS	\$0.00	\$0.00	\$9,635.34	\$1,927.10
		353	CSG CLIENT DIRECTED	\$1,149.29	\$0.00	\$3,440.44	\$458.31
			CSG MUTUAL FUND				
		354	WRAP	\$0.00	\$0.00	(\$29.39)	(\$5.88)
		115	CTF OF DEPOSIT	\$46.40	\$0.00	\$519.00	\$94.52
		201	GOVERNMENT BONDS	\$0.00	\$0.00	\$2,170.80	\$434.16
		411	INSURANCE VIA SBA	\$1.73	\$0.00	\$39.31	\$7.53
		478	MMMF ADMIN FEE	\$360.85	\$0.00	\$980.25	\$0.00
		454	MUTUAL FD 12B-1 TRL	\$2,010.70	\$0.00	\$5,303.18	\$658.65
		451	MUTUAL FUNDS	(\$300.00)	(\$60.00)	\$6,945.05	\$1,389.01
			Net Over-Hurdle Payout				
			(Net Eligible Production				
			NHRD Over Hurdle)	\$0.00	\$0.00	\$0.00	\$3,127.35
		051	OPTIONS	\$116.00	\$0.00	\$174.00	\$0.00
		643	STATE RENEWAL FEES	\$0.00	\$0.00	\$0.00	(\$285.00)
		110	UW CORPORATE BONDS	\$0.00	\$0.00	\$262.50	\$52.50
				\$5,164.16	(\$60.00)	\$36,031.28	\$8,610.43

Compensation Statement

March 2007 - ALL EC Cycles - MTD Final

CL40 - Conrad, Robert
CL - Cherry Hill/Marlton
Financial Advisor

Comp Hire Date: 05/12/1995
Comp Firm LOS: 11
Comp Industry Start Date: 06/20/1981
Comp Industry LOS: 25

Schedule: Standard No Net

CL40

Gross Commission		\$5,164.16
Payout Eligible Gross		-\$300.00
Net Commission	-\$60.00	

Adjustments

Draw Adjustment reverse March draw ded did not rec draw on 3/15	\$1,972.00	
Voluntary Allocation Charge - Flat Recurring - Joanna Moore	-\$100.00	
Minimum Wage Draw	-\$1,972.00	

Commission Earnings		-\$160.00
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Deficit Offsets	\$160.00	
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EC EARNINGS		\$.00
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Prior Month Deficit Balance		\$.00
Current Month Deficit		\$160.00
Deficit Repayment		\$.00
Deficit Balance		\$160.00

Compensation Statement

***** END OF REPORT FOR YOUR VIEWING ACCESS *****

Note: You may also be viewing this page if no records were found for the criteria selected.

Selected Criteria:**Parameter****Value**

Broker Dealer Party ID

First Clearing, LLC

Associate

cl40

Commission Month

04/2007

EC Cycle

ALL

MTD or YTD

MTD Totals

NO check

Commission Date	Associate Name	Comp Cat Code	Comp Cat Name	MTD Gross	MTD Net	YTD Gross	YTD Net
April 30, 2007	Conrad, Robert						
		479	TRAIL	\$101.44	\$0.00	\$461.85	\$0.00
		409	ANNUITIES-SPECIAL	\$3,088.39	\$0.00	\$6,654.88	\$700.85
		459	CLOSED END MF	\$0.00	\$0.00	\$100.00	\$5.00
		002	COMMON STOCK	\$3,110.05	\$0.00	\$5,673.95	\$46.33
		101	CORPORATE BONDS	\$372.75	\$0.00	\$10,008.09	\$1,927.10
		353	CSG CLIENT DIRECTED	\$1,085.37	\$0.00	\$4,525.81	\$458.31
		354	WRAP	\$0.00	\$0.00	(\$29.39)	(\$5.88)
		115	CTF OF DEPOSIT	\$161.60	\$0.00	\$680.60	\$94.52
		201	GOVERNMENT BONDS	\$774.54	\$0.00	\$2,945.34	\$434.16
		411	INSURANCE VIA SBIA	\$19.64	\$0.00	\$58.95	\$7.53
		478	MMMF ADMIN FEE	\$359.14	\$0.00	\$1,339.39	\$0.00
		454	MUTUAL FD 12B-1 TRL	\$2,573.87	\$0.00	\$7,877.05	\$658.65
		452	COMMISSION	\$5.00	\$0.00	\$5.00	\$0.00
		451	MUTUAL FUNDS	\$24.98	\$0.00	\$6,970.03	\$1,389.01
		NHRD (Net Eligible Production		\$0.00	\$0.00	\$0.00	\$3,127.35
		051	OPTIONS	\$145.00	\$0.00	\$319.00	\$0.00
		643	STATE RENEWAL FEES	\$0.00	\$0.00	\$0.00	(\$285.00)
		110	BONDS	\$0.00	\$0.00	\$262.50	\$52.50
				\$11,821.77	\$0.00	\$47,853.05	\$8,610.43

<u>Commission Date</u>	<u>Associate Name</u>	<u>Comp Cat Code</u>	<u>Comp Cat Name</u>	<u>MTD Gross</u>	<u>MTD Net</u>	<u>YTD Gross</u>	<u>YTD Net</u>
May 31, 2007	Conrad, Robert						
		479	3RD PARTY MMKT TRAIL	\$37.53	\$0.00	\$499.38	\$0.00
		409	ANNUITIES-SPECIAL	\$64.27	\$12.87	\$6,719.15	\$713.72
		459	CLOSED END MF	\$0.00	\$0.00	\$100.00	\$5.00
		002	COMMON STOCK	\$739.20	\$72.85	\$6,413.15	\$119.18
		101	CORPORATE BONDS	\$49,213.16	\$9,842.75	\$59,221.25	\$11,769.85
		353	CSG CLIENT DIRECTED	\$1,121.57	\$224.35	\$5,647.38	\$682.66
		354	CSG MUTUAL FUND WRAP	\$0.00	\$0.00	(\$29.39)	(\$5.83)
		115	CTF OF DEPOSIT	\$83.70	\$16.74	\$764.30	\$111.26
		201	GOVERNMENT BONDS	\$1,162.44	\$163.08	\$4,107.78	\$597.24
		411	INSURANCE VIA SBIA	\$1.73	\$0.35	\$60.68	\$7.88
		478	MMMF ADMIN FEE	\$452.97	\$0.00	\$1,792.36	\$0.00
		454	MUTUAL FD 12B-1 TRL	\$721.83	\$144.40	\$8,598.88	\$803.05
		452	MUTUAL FD COMMISSION	\$0.00	\$0.00	\$5.00	\$0.00
		451	MUTUAL FUNDS	\$0.00	\$0.00	\$6,970.03	\$1,389.01
			Net Over-Hurdle Payout (Net				
			NHRD Eligible Production Over Hurdle)				
		051	OPTIONS	\$0.00	\$12,881.35	\$0.00	\$16,008.70
				\$116.44	\$0.00	\$435.44	\$0.00
		643	STATE RENEWAL FEES	\$0.00	\$0.00	\$0.00	(\$285.00)
		110	UW CORPORATE BONDS	\$0.00	\$0.00	\$262.50	\$52.50
				\$53,714.84	\$23,358.74	\$101,567.89	\$31,969.17

Compensation Statement

May 2007 - ALL EC Cycles - MTD Final

CL40 - Conrad, Robert
CL - Cherry Hill/Marlton
Financial Advisor

Comp Hire Date: 05/12/1995
Comp Firm LOS: 12
Comp Industry Start Date: 06/20/1981
Comp Industry LOS: 25

Schedule: Growth Plan

CL40

Gross Commission		\$53,714.84
Payout Eligible Gross		\$53,251.34
Net Commission	\$10,477.39	
Net Over Hurdle	\$12,881.35	

Adjustments

Draw Adjustment March and April draw collection	-\$3,944.00
Draw Adjustment May draw collection	-\$1,972.00
Commission Adjustment - YTD April commissions	\$2,378.46
Commission Adjustment - YTD March commissions	\$708.11

Commission Earnings		\$20,529.31
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Deficit Offsets	\$857.43
Current Month Overdraw Repay	-\$1,017.43

EC EARNINGS		\$20,369.31
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Prior Month Deficit Balance		\$160.00
Current Month Deficit		\$857.43
Deficit Repayment		-\$1,017.43
Deficit Balance		\$.00



WACHOVIA

* The YTD balances include adjustments and are as of the end of the month.
 ** Denotes eligible functional BEC earnings

PayGroup:	CMC Semimonthly Pay Group	Advice#:	0024739
Pay Begin Date:	06/01/2007		
Pay End Date:	06/15/2007	Advice Date:	06/15/2007

Robert Conrad 44 Longwood Drive Sicklerville, NJ 08081 SSN: XXX-XX-1807	HR Emplid: 630720	TAX DATA:	<u>Federal</u>	<u>NJ State</u>
	Department: Cherry Hill Complex	Marital Status:	Married	M-Joint
	CO/RC: CMC 0840175	Allowances:	10	10
	Pay Rate: \$0.00 Annual	Addl Pct:	0.0	0.0
		Addl Amt:	\$0.00	\$0.00

HOURS AND EARNINGS

Description	Current		YTD *	
	Rate	Hours	Hours	Earnings
FA Draw (092*)**				\$11,832.00
Commission A/Rate (UL1*)**				\$25,395.99
Total	0.00		0.00	\$37,227.99

TAXES

	Current	YTD *
Fed Withholding	\$4,503.55	\$5,080.57
Fed FICA - MHI	\$323.95	\$539.81
Fed OASDI/Dis	\$1,385.17	\$2,308.14
NJ Unempl EE	\$44.81	\$101.75
NJ NJ HCSF	\$0.00	\$0.00
NJ NJ WFDP	\$2.93	\$6.65
NJ NJ SWAF	\$2.05	\$4.66
NJ Withholding	\$1,138.89	\$1,358.16
NJ MMLIPAF-EMPLOYEE Withholding	\$0.00	\$3.00
Total	\$7,401.35	\$9,402.74

BEFORE-TAX DEDUCTIONS

AFTER-TAX DEDUCTIONS

Description	Current	YTD *	Description	Current	YTD *
Total:	\$0.00	\$0.00	Total:	\$0.00	\$0.00

	TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current:	\$22,341.31	\$22,341.31	\$7,401.35	\$0.00	\$14,939.96
YTD:	\$37,227.99	\$37,227.99	\$9,402.74	\$0.00	\$27,825.25

NET PAY DISTRIBUTION

Checking	Account ending in 1848	\$14,939.96
Total		\$14,939.96

<u>Commission Date</u>	<u>Associate Name</u>	<u>Comp Cat Code</u>	<u>Comp Cat Name</u>	<u>MTD Gross</u>	<u>MTD Net</u>	<u>YTD Gross</u>	<u>YTD Net</u>
June 30, 2007	Conrad, Robert						
		479	3RD PARTY MMKT TRAIL	\$114.40	\$0.00	\$613.78	\$0.00
		409	ANNUITIES-SPECIAL	\$55.60	\$13.13	\$6,784.75	\$726.85
		459	CLOSED END MF	\$0.00	\$0.00	\$100.00	\$5.00
		002	COMMON STOCK	\$889.79	\$93.95	\$7,302.94	\$213.13
		101	CORPORATE BONDS	\$11,177.93	\$2,235.63	\$70,399.18	\$14,005.48
		353	CSG CLIENT DIRECTED	\$1,007.02	\$201.45	\$6,654.40	\$884.11
		354	CSG MUTUAL FUND WRAP	\$0.00	\$0.00	(\$29.39)	(\$5.88)
		115	CTF OF DEPOSIT	\$246.00	\$49.20	\$1,010.30	\$160.46
		201	GOVERNMENT BONDS	\$1,481.07	\$252.53	\$5,588.85	\$849.77
		411	INSURANCE VIA SBIA	\$0.68	\$0.15	\$61.36	\$8.03
		404	LIFE INSURANCE	\$1.07	\$0.22	\$1.07	\$0.22
		478	MMMF ADMIN FEE	\$414.25	\$0.00	\$2,206.61	\$0.00
		454	MUTUAL FD 12B-1 TRL	\$1,965.73	\$393.17	\$10,564.61	\$1,196.22
		452	MUTUAL FD COMMISSION	\$5.00	\$1.00	\$10.00	\$1.00
		451	MUTUAL FUNDS	\$3,437.50	\$687.50	\$10,407.53	\$2,076.51
			Net Over-Hurdle Payout (Net				
			NHRD Eligible Production Over Hurdle)				
		051	OPTIONS	\$0.00	\$3,150.25	\$0.00	\$19,158.95
				\$232.00	\$0.00	\$667.44	\$0.00
		643	STATE RENEWAL FEES	\$0.00	\$0.00	\$0.00	(\$285.00)
		110	UW CORPORATE BONDS	\$0.00	\$0.00	\$262.50	\$52.50
				\$21,038.04	\$7,078.18	\$122,605.93	\$39,047.35

Compensation Statement

June 2007 - ALL EC Cycles - MTD Final

CL40 - Conrad, Robert
CL - Cherry Hill/Marilton
Financial Advisor

Comp Hire Date: 05/12/1995
Comp Firm LOS: 12
Comp Industry Start Date: 06/20/1981
Comp Industry LOS: 26

Schedule: Growth Plan

CL40

Gross Commission		\$21,038.04
Payout Eligible Gross		\$20,542.48
Net Commission	\$3,927.93	
Net Over Hurdle	\$3,150.25	

Adjustments	
Minimum Wage Draw	-\$1,972.00

Commission Earnings	\$5,106.18
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EC EARNINGS	\$5,106.18
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* The YTD balances include adjustments and are as of the end of the month.
 ** Denotes eligible functional SEC earnings

PayGroup:	CMC Semimonthly Pay Group	Advice#:	0023377
Pay Begin Date:	07/01/2007		
Pay End Date:	07/15/2007	Advice Date:	07/13/2007

Robert Conrad	HR Emplid: 630720	TAX DATA:	Federal	NJ State
44 Longwood Drive	Department: Cherry Hill	Marital Status:	Married	M-Joint
Sicklerville, NJ 08081	CO/RC: CMC 0840175	Allowances:	10	10
SSN: XXX-XX-1807	Pay Rate: \$0.00 Annual	Addl Pct:	0.0	0.0
		Addl Amt:	\$0.00	\$0.00

HOURS AND EARNINGS

Description	Current			YTD *	
	Rate	Hours	Earnings	Hours	Earnings
FA Draw (092*)**			\$1,972.00		\$13,804.00
Commission A/Rate (UL1*)**			\$5,106.18		\$30,502.17
Total		0.00	\$7,078.18	0.00	\$44,306.17

TAXES

	Current	YTD *
Fed Withholding	\$472.77	\$5,553.34
Fed FICA - MHI	\$102.63	\$642.44
Fed OASDI/Dis	\$438.84	\$2,746.98
NJ Unempl EE	\$0.00	\$101.75
NJ NJ HCSF	\$0.00	\$0.00
NJ NJ WFDP	\$0.00	\$6.65
NJ NJ SWAF	\$0.00	\$4.66
NJ Withholding	\$136.05	\$1,494.21
NJ MMLIPAF-EMPLOYEE Withholding	\$0.00	\$3.00
Total	\$1,150.29	\$10,553.03

BEFORE-TAX DEDUCTIONS

AFTER-TAX DEDUCTIONS

Description	Current	YTD *	Description	Current	YTD *
Total:	\$0.00	\$0.00	Total:	\$0.00	\$0.00

TOTAL GROSS		FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current:	\$7,078.18	\$7,078.18	\$1,150.29	\$0.00	\$5,927.89
YTD:	\$44,306.17	\$44,306.17	\$10,553.03	\$0.00	\$33,753.14

NET PAY DISTRIBUTION

Checking	Account ending in 1848	\$5,927.89
Total		\$5,927.89

Compensation Statement

July 2007 - ALL EC Cycles - MTD Final

CL40 - Conrad, Robert
CL - Cherry Hill/Marlton
Financial Advisor

Comp Hire Date: 05/12/1995
Comp Firm LOS: 12
Comp Industry Start Date: 06/20/1981
Comp Industry LOS: 26

Schedule: Growth Plan

CL40

Gross Commission		\$24,022.46
Payout Eligible Gross		\$23,678.91
Net Commission	\$4,494.37	
Net Over Hurdle	\$4,065.96	

Adjustments

Retention Bonus PSI/WSI Final Retention Payment	\$6,444.55
Minimum Wage Draw	-\$1,972.00

Commission Earnings	\$13,032.88
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EC EARNINGS	\$13,032.88
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Robert S Conrad Sr 44 Longwood Drive Sicklerville, NJ 08081 SSN: xxx-xx-1807	HR Empl ID: 630720	TAX DATA: Federal NJ State
	Department: Cherry Hill	Marital Status: Married M-Joint
	CO/RC: CMC 0840175	Allowances: 10 10
	Pay Rate: \$0.00 Annual	Addl. Pct.:
		Addl. Amt.:

HOURS AND EARNINGS						TAXES		
----- Current ----- YTD -----								
Description	Rate	Hours	Earnings	Hours	Earnings	Description	Current	YTD
FA Draw (092*)			1,972.00		15,776.00	Fed Withholding	558.34	7,722.82
Service-Based Flexible Dollars			41.66		41.66	Fed MED/EE	120.28	856.17
Medical Credits			634.42		634.42	Fed OASDI/EE	514.33	3,660.87
Imputed Income Group Term Life			42.87		42.87	NJ Withholding	217.18	2,593.55
Commission A/Rate (UL1*)			6,588.33		37,090.50	NJ MMLIPAF-EE Wi	-3.00	0.00
CMG WS Retention Bonus			0.00		6,444.55	NJ Unempl EE	0.00	101.75
						NJ NJ WDPF	0.00	6.65
						NJ NJ SWAF	0.00	4.66
Total:			9,236.41		59,987.13	Total:	1,407.13	14,946.47

BEFORE TAX DEDUCTIONS			AFTER TAX DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD
Medical Coverage	956.40	956.40	Dep Life Ins Child	2.66	2.66
Supplemental Life In	27.26	27.26	Dep Life Ins Spouse	5.88	5.88
Total: 983.66 983.66			Total: 8.54 8.54		
TOTAL GROSS		FED TAXABLE GROSS	TOTAL TAXES		TOTAL DEDUCTIONS
Current:	9,236.41	8,295.62	1,407.13		992.20
YTD:	59,987.13	59,046.34	14,946.47		992.20
					NET PAY
					6,837.08

NET PAY DISTRIBUTION	
Advice #0023901	6,837.08
Total:	6,837.08

MESSAGE:



1525 West WT Harris Blvd
Charlotte, NC 28288

Date
08/15/2007

Advice No.
23901

WACHOVIA

Deposit Amount: \$6,837.08

To The
Account(s) Of

ROBERT S CONRAD SR

Mail Drop: WS3095

23901

DIRECT DEPOSIT DISTRIBUTION		
Account Type	Account Number	Deposit Amount
Checking	ending in 1848	\$6,837.08
Total:		\$6,837.08

NON-NEGOTIABLE

<u>Commission Date</u>	<u>Associate Name</u>	<u>Comp Cat Code</u>	<u>Comp Cat Name</u>	<u>MTD Gross</u>	<u>MTD Net</u>	<u>YTD Gross</u>	<u>YTD Net</u>
August 31, 2007	Conrad, Robert						
		479	3RD PARTY MMKT TRAIL	\$32.08	\$0.00	\$717.20	\$0.00
		409	ANNUITIES-SPECIAL	\$913.68	\$182.75	\$10,602.08	\$1,490.63
		459	CLOSED END MF	\$482.02	\$36.43	\$582.02	\$41.43
		002	COMMON STOCK	\$973.75	\$81.10	\$9,977.91	\$453.24
		101	CORPORATE BONDS	\$8,995.29	\$1,788.27	\$91,095.33	\$18,117.62
		359	CSG CLIENT DIRECT < M	\$0.00	\$0.00	\$0.12	\$0.03
		353	CSG CLIENT DIRECTED	\$1,100.24	\$220.08	\$8,854.88	\$1,324.27
		354	CSG MUTUAL FUND WRAP	\$0.00	\$0.00	(\$29.39)	(\$5.88)
		115	CTF OF DEPOSIT	\$126.90	\$25.38	\$1,461.25	\$250.65
		201	GOVERNMENT BONDS	\$1,020.43	\$187.85	\$7,739.91	\$1,254.25
		411	INSURANCE VIA SBIA	\$98.35	\$19.68	\$161.44	\$28.06
		404	LIFE INSURANCE	\$0.00	\$0.00	\$1.07	\$0.22
		478	MMMF ADMIN FEE	\$388.67	\$0.00	\$2,983.58	\$0.00
		151	MUNICIPAL BONDS	\$0.00	\$0.00	\$147.45	\$29.49
		454	MUTUAL FD 12B-1 TRL	\$728.07	\$145.63	\$13,827.55	\$1,848.92
		452	MUTUAL FD COMMISSION	\$410.91	\$82.19	\$420.91	\$83.19
		451	MUTUAL FUNDS	\$0.00	\$0.00	\$12,367.53	\$2,468.51
			Net Over-Hurdle Payout (Net Eligible Production Over NHRD Hurdle)				
				\$0.00	\$1,664.69	\$0.00	\$24,889.60
		051	OPTIONS	\$812.98	\$0.00	\$1,538.42	\$0.00
		643	STATE RENEWAL FEES	\$0.00	\$0.00	\$0.00	(\$285.00)
		110	UW CORPORATE BONDS	\$0.00	\$0.00	\$262.50	\$52.50
				\$16,083.37	\$4,434.05	\$162,711.76	\$52,041.73

Compensation Statement
August 2007 - ALL EC Cycles - MTD Final

CL40 - Conrad, Robert
CL - Cherry Hill/Marilton
Financial Advisor

Comp Hire Date: 05/12/1995
Comp Firm LOS: 12
Comp Industry Start Date: 06/20/1981
Comp Industry LOS: 26

Schedule: Growth Plan

CL40

Gross Commission		\$16,083.37
Payout Eligible Gross		\$15,091.72
Net Commission	\$2,769.36	
Net Over Hurdle	\$1,664.69	

Adjustments

Draw Adjustment collect OD not taken on 6/15 payroll	-\$857.43
Minimum Wage Draw	-\$1,972.00

Commission Earnings	\$1,604.62
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EC EARNINGS	\$1,604.62
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Pay Comp: SEM-CMC Semi-Monthly Pay Gro
Pay Begin Date: 09/01/2007
Pay End Date: 09/15/2007
Advice #: 0024066
Advice Date: 09/14/2007

Robert S Conrad Sr
44 Longwood Drive
Sicklerville, NJ 08081

SSN: XXX-XX-1807

HR Empl ID: 630720
Department: Cherry Hill
CO/RC: CMC 0840175
Pay Rate: \$0.00 Annual

TAX DATA: Federal NJ State
Marital Status: Married M-Joint
Allowances: 10 10
Addl. Pct.:
Addl. Amt.:

HOURS AND EARNINGS						Addl. Amt:			
Description	Current			YTD			TAXES		
	Rate	Hours	Earnings	Hours	Earnings	Description	Current	YTD	
FA Draw (092*)			1,972.00		17,748.00	Fed MED/EE	48.02	904.19	
Service-Based Flexible Dollars			41.66		83.32	Fed OASDI/EE	205.34	3,866.21	
Medical Credits			634.42		1,268.84	NJ Withholding	46.53	2,640.08	
Imputed Income Group Term Life			42.87		85.74	Fed Withholding	0.00	7,722.82	
Commission A/Rate (UL1*)			1,604.62		38,695.12	NJ Unempl EE	0.00	101.75	
CMG WS Retention Bonus			0.00		6,444.55	NJ NJ WDPF	0.00	6.65	
						NJ NJ SWAF	0.00	4.66	
Total:			4,252.70		64,239.83	Total: 299.89 15,246.36			
BEFORE TAX DEDUCTIONS				AFTER TAX DEDUCTIONS					
Description	Current	YTD	Description	Current	YTD				
Medical Coverage	956.40	1,912.80	Dep Life Ins Child	2.66	5.32				
Supplemental Life In	27.26	54.52	Dep Life Ins Spouse	5.88	11.76				
Total: 983.66 1,967.32			Total: 8.54 17.08						
TOTAL GROSS		FED TAXABLE GROSS		TOTAL TAXES		TOTAL DEDUCTIONS		NET PAY	
Current:	4,252.70		3,311.91		299.89		992.20	2,960.61	
YTD:	64,239.83		62,358.25		15,246.36		1,984.40	47,009.07	
NET PAY DISTRIBUTION									
Advice #0024066								2,960.61	
Total:								2,960.61	

MESSAGE:



WACHOVIA

1525 West WT Harris Blvd
Charlotte, NC 28288

Date
09/14/2007

Advice No.
24066

Deposit Amount: **\$2,960.61**

To The
Account(s) Of

ROBERT S CONRAD SR

Mail Drop: WS3095

24066

DIRECT DEPOSIT DISTRIBUTION		
Account Type	Account Number	Deposit Amount
Checking	ending in 1848	\$2,960.61
Total:		\$2,960.61

NON-NEGOTIABLE

Commission Date	Associate Name	Comp Cat Code	Comp Cat Name	MID Gross	MTD Net	YTD Gross	YTD Net
September 30, 2007	Conrad, Robert						
		479	3RD PARTY MMKT	\$130.45	\$0.00	\$847.65	\$0.00
		409	ANNUITIES-SPECIAL	\$64.52	\$12.91	\$10,666.60	\$1,503.54
		459	CLOSED END MF	\$0.00	\$0.00	\$582.02	\$41.43
		002	COMMON STOCK	\$0.18	\$0.00	\$9,978.09	\$453.24
		101	CORPORATE BONDS	\$4,803.58	\$960.74	\$95,898.91	\$19,078.36
		359	CSG CLIENT DIRECT <	\$0.00	\$0.00	\$0.12	\$0.03
		353	CSG CLIENT DIRECTED	\$1,064.69	\$212.98	\$9,919.57	\$1,537.25
		354	CSG MUTUAL FUND	\$0.00	\$0.00	(\$29.39)	(\$5.88)
		115	CTF OF DEPOSIT	\$100.00	\$20.00	\$1,561.25	\$270.65
		645	DK CHARGES	\$0.00	(\$15.00)	\$0.00	(\$15.00)
		201	GOVERNMENT BONDS	\$21.25	\$0.00	\$7,761.16	\$1,254.25
		411	INSURANCE VIA SBIA	\$1.73	\$0.35	\$163.17	\$28.41
		404	LIFE INSURANCE	\$0.00	\$0.00	\$1.07	\$0.22
		478	MMMF ADMIN FEE	\$344.27	\$0.00	\$3,327.85	\$0.00
		151	MUNICIPAL BONDS	\$0.00	\$0.00	\$147.45	\$29.49
		454	MUTUAL FD 12B-1 TRL	\$1,935.53	\$387.16	\$15,763.08	\$2,236.08
		452	MUTUAL FD	\$0.00	\$0.00	\$420.91	\$83.19
		451	MUTUAL FUNDS	\$0.00	\$0.00	\$12,367.53	\$2,468.51
			(Net Eligible Production				
		NHRD	Over Hurdle)	\$0.00	\$0.00	\$0.00	\$24,889.60
		051	OPTIONS	\$145.01	\$0.00	\$1,683.43	\$0.00
		643	STATE RENEWAL FEES	\$0.00	\$0.00	\$0.00	(\$285.00)
		110	UW CORPORATE	\$0.00	\$0.00	\$262.50	\$52.50
				\$8,611.21	\$1,579.14	\$171,322.97	\$53,620.87

Compensation Statement

September 2007 - ALL EC Cycles - MTD Final

CL40 - Conrad, Robert
CL - Cherry Hill/Marlton
Financial Advisor

Comp Hire Date: 05/12/1995
Comp Firm LOS: 12
Comp Industry Start Date: 06/20/1981
Comp Industry LOS: 26

Schedule: Growth Plan

CL40

Gross Commission		\$8,611.21
Payout Eligible Gross		\$8,444.77
DK Charges	-\$15.00	
Net Commission	\$1,594.14	

Adjustments		
Minimum Wage Draw	-\$1,972.00	

Commission Earnings		\$392.86
Deficit Offsets	\$392.86	

EC EARNINGS		\$0.00
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Prior Month Deficit Balance	\$0.00
Current Month Deficit	\$392.86
Deficit Repayment	\$0.00
Deficit Balance	\$392.86

Wachovia Securities, LLC
1525 West WT Harris Blvd
Charlotte, NC 28262-0892

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Pay Group: SEM-CMC Semimonthly Pay Gro Advice #: 0024506
Pay Begin Date: 10/01/2007
Pay End Date: 10/15/2007 Advice Date: 10/15/2007

Robert S Conrad Sr 44 Longwood Drive Sicklerville, NJ 08081 SSN: xxx-xx-1807	HR Empl ID: 630720 Department: Cherry Hill CO/RC: CMC 0840175 Pay Rate: \$0.00 Annual	TAX DATA: Federal NJ State Marital Status: Married M-Joint Allowances: 10 10 Addl. Pct.: Addl. Aml.:
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HOURS AND EARNINGS						TAXES		
----- Current ----- YTD -----								
Description	Rate	Hours	Earnings	Hours	Earnings	Description	Current	YTD
FA Draw (092*)			1,972.00		19,720.00	Fed MED/EE	24.76	928.95
Service-Based Flexible Dollars			41.66		124.98	Fed OASDI/EE	105.85	3,972.06
Medical Credits			634.42		1,903.26	NJ Withholding	17.08	2,657.16
Imputed Income Group Term Life			42.87		128.61	Fed Withholding	0.00	7,722.82
CMG WS Retention Bonus			0.00		6,444.55	NJ Unempl EE	0.00	101.75
Commission A/Rate (UL1*)			0.00		38,695.12	NJ NJ WDPF	0.00	6.65
						NJ NJ SWAF	0.00	4.66
Total:			2,648.08		66,887.91	Total:	147.69	15,394.05
BEFORE TAX DEDUCTIONS						AFTER TAX DEDUCTIONS		
Description	Current	YTD				Description	Current	YTD
Medical Coverage	956.40	2,869.20				Dep Life Ins Child	2.66	7.98
Supplemental Life In	27.26	81.78				Dep Life Ins Spouse	5.88	17.64
Total:	983.66	2,950.98				Total:	8.54	25.62
TOTAL GROSS		FED TAXABLE GROSS		TOTAL TAXES		TOTAL DEDUCTIONS		NET PAY
Current:	2,648.08	1,707.29		147.69		992.20		1,508.19
YTD:	66,887.91	64,065.54		15,394.05		2,976.60		48,517.26

NET PAY DISTRIBUTION	
Advice #0024506	1,508.19
Total:	1,508.19

MESSAGE:



1525 West WT Harris Blvd
Charlotte, NC 28288

Date
10/15/2007

Advice No.
24506

WACHOVIA

Deposit Amount: **\$1,508.19**

To The
Account(s) Of

ROBERT S CONRAD SR

Mail Drop: WS3095

24506

DIRECT DEPOSIT DISTRIBUTION		
Account Type	Account Number	Deposit Amount
Checking	ending in 1848	\$1,508.19
Total:		\$1,508.19

NON-NEGOTIABLE

Commission Date	Associate Name	Comp Cat Code	Comp Cat Name	MTD Gross	MTD Net	YTD Gross	YTD Net
October 31, 2007	Conrad, Robert						
		479	3RD PARTY MMKT TRAIL	\$45.35	\$0.00	\$893.00	\$0.00
		409	ANNUITIES-SPECIAL	\$3,098.39	\$620.00	\$13,764.99	\$2,123.54
		459	CLOSED END MF	\$0.00	\$0.00	\$582.02	\$41.43
		002	COMMON STOCK	\$547.36	\$34.30	\$10,525.45	\$487.54
		101	CORPORATE BONDS	\$50,687.21	\$10,132.38	\$146,586.12	\$29,210.74
		359	CSG CLIENT DIRECT < M	\$0.00	\$0.00	\$0.12	\$0.03
		353	CSG CLIENT DIRECTED	\$1,013.57	\$202.73	\$10,933.14	\$1,739.98
		354	CSG MUTUAL FUND WRAP	\$0.00	\$0.00	(\$29.39)	(\$5.88)
		115	CTF OF DEPOSIT	\$89.00	\$17.80	\$1,650.25	\$288.45
		645	DK CHARGES	\$0.00	\$0.00	\$0.00	(\$15.00)
		201	GOVERNMENT BONDS	\$1,453.21	\$260.61	\$9,214.37	\$1,514.86
		411	INSURANCE VIA SBA	\$1.73	\$0.35	\$164.90	\$28.76
		404	LIFE INSURANCE	\$0.00	\$0.00	\$1.07	\$0.22
		478	MMMF ADMIN FEE	\$652.01	\$0.00	\$3,979.86	\$0.00
		151	MUNICIPAL BONDS	\$0.00	\$0.00	\$147.45	\$29.49
		454	MUTUAL FD 12B-1 TRL	\$2,475.89	\$495.27	\$18,238.97	\$2,731.35
		452	MUTUAL FD COMMISSION	\$0.00	\$0.00	\$420.91	\$83.19
		451	MUTUAL FUNDS	\$8,199.50	\$1,639.90	\$20,567.03	\$4,108.41
		Net Over-Hurdle Payout (Net NHRD Eligible Production Over Hurdle)					
		051	OPTIONS	\$0.00	\$17,239.76	\$0.00	\$42,129.36
		643	STATE RENEWAL FEES	\$90.32	\$0.00	\$1,773.75	\$0.00
		110	UW CORPORATE BONDS	\$0.00	\$0.00	\$0.00	(\$285.00)
				\$68,353.54	\$30,643.10	\$239,676.51	\$84,263.97

Compensation Statement

October 2007 - ALL EC Cycles - MTD Preliminary

CL40 - Conrad, Robert
CL - Cherry Hill/Marilton
Financial Advisor

Comp Hire Date: 05/12/1995
Comp Firm LOS: 12
Comp Industry Start Date: 06/20/1981
Comp Industry LOS: 26

Schedule: Growth Plan

CL40

Gross Commission		\$68,353.54
Payout Eligible Gross		\$68,011.20
Net Commission	\$13,403.34	
Net Over Hurdle	\$17,239.76	

Adjustments		
Minimum Wage Draw	-\$1,972.00	

Commission Earnings		\$28,671.10
Current Month Overdraw Repay	-\$392.86	

EC EARNINGS		\$28,278.24
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Prior Month Deficit Balance	\$392.86
Current Month Deficit	\$.00
Deficit Repayment	-\$392.86
Deficit Balance	\$.00